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SOCIO-PHILOSOPHICAL ASPECTS OF HEALTH

Textbook

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The manual was prepared in accordance with the requirements of the Federal State Educational Standard of Higher Education 3++ in specialty 31.05.03 «Dentistry» the current curriculum and on the basis of the work pro-gram on the discipline of sociology of health.

The tutorial sets out the main approaches, concepts and theories that reflect the social aspects of human health. The problems of social determinism of health at the individual and population levels, attitudes towards human and society health are considered. The features of the functioning of health care as a part of the social sphere of society and medicine as a social institution are revealed.

The publication is a textbook for the assimilation and consolidation of students' knowledge, includes theoretical material, questions for repetition, test tasks with answer standards and a list of recommended literature. It is intended to optimize the independent work of students and the effective use of control and teaching methods of mastering the discipline "Sociology of Health" that stimulate active activity. It is intended for students studying in the direction and specialty "Dentistry" as well as for readers specializing in the field of social knowledge or interested in social theory.

Recommended in print by the Coordination Scientific-Methodological Council and approved by the decision of the Editorial and Publishing Council of the FSBEI HE «Bashkir State Medical University»of The Ministry of Healthcare of Russia.

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CONTENT

Introduction …… 5

Chapter I. Health as concretely — a holistic state of biosocial human organization …… 9

1.1. The unity of life, organism and health in the context of interaction individual and social in a person …… 9

1.2. The concept of "condition" in medicine, health care and philosophy 18

1.3. Systemic patterns and determinations of health …… 30

1.4. Features of determination in general human pathology …… 39

1.5. Questions and exercises for self-examination …… 49

Chapter II. The principle of biosociality in the genetics of individual and public health of a person …… 50

2.1. General genetics - the source of human genetics …… 50

2.2. "Barrier of sociality" in the genetic evolution of anthropogenesis and human health …… 62

2.3. "The genetic burden of humanity" and giftedness …… 67

2.4. Relativity of internal and external in the structure of human health in the context of evolutionary ecology …… 79

2.5. Questions and exercises for self-examination …… 86

Chapter III. Cultural and historical factors of modern human health …… 87

3.1. Specific historical forms of public health activities …… 87

3. 2. Social spheres and institutions as factors of health …… 94

3.3. Structural interactions in the economics of modern healthcare and pharmacy …… 100

3.4. The problem of harmonization of health factors of modern man in the context of ecology …… 114

3.5. Questions and exercises for self-examination …… 125
Chapter 1V. Lifestyle as a multidimensional factor in health …… 126
4.1. Interaction of the individual and the public in lifestyle …… 126
4.2. Psychological factors of health …… 136
4.3. Modern civilization and physical culture …… 151
4.4. Human health in the context of morality and law …… 161
4.5. Questions and exercises for self-examination …… 175
Conclusion …… 176
Test tasks …… 180
Standards of answers to test tasks …… 204
Situational tasks …… 205
Review questions …… 217
Recommended reading …… 219

INTRODUCTION

The well-known relevance of research on the value and significance of health in human life in the modern conditions of Russian society is not weakening, but, on the contrary, is increasing, increasing. This is due to at least two major reasons. First, the difficulty of transforming society in Russia, along with some positive shifts towards democracy and a market economy, have also generated negative processes that create stressful conditions in society and negatively affect people's health. These processes include an increase in crime, a deterioration in the material situation of a significant part of the population, the spread among the population and especially young people of drug addiction, alcoholism and the associated anxiety for the fate of children, the emergence and spread of new diseases, an observed reduction in life expectancy, increased disability, etc.

Secondly, the relevance of the problem of health in the world-historical aspect of the development of mankind remains, remains, because health belongs to the highest values along with life.

There is an urgent need for research on the socio-philosophical aspect of modern human health. Clarification of a specific subject of research requires a review of the literature on both philosophical and medical, biological and general methodological issues that can be used for philosophical reflections.

This topic is universal and its relevance can never be exhausted. People, society, humanity are interested in questions about what processes, what structural changes occur in the body of a modern person, burdened by natural disasters, large-scale man-made disasters, new diseases that cannot yet be cured, interethnic, interreligious, interstate gift conflicts and wars, etc.

Healthcare in Russia is going through a deep crisis, and the search for a way out of it is becoming an urgent problem. The course "Sociology of Health" is new for the Russian educational space, in addition, the social aspects of health are not so often the subject of scientific research in our country, which determines the lack of educational and methodological support of the discipline.

The proposed textbook, written in accordance with the requirements of the Federal State Educational Standard of Higher Education, aims to present to students studying in the specialty "Dentistry" the most pressing issues and problems of human health, to fill the gap in the coverage of social problems of health, healthcare and medicine, social processes and phenomena related to individual and public health, to consider the relationship between health medicine and philosophy in their historical development, as well as reflect the current state of this problem and the need for its solution based on philosophical methodology.

The material of the tutorial includes 4 topics. The logic of the presentation is based on the coverage of general problems of human health, a historical excursion into the scientific study of public health to the characteristics of the characteristics of specific social institutions that implement the function of preserving and strengthening the health of the population. Considerable attention of the authors is focused on the problems of social conditioning of health. Each topic is internally structured into separate questions. Some help in mastering the material can be provided by the basic concepts of the topics given at the beginning.

The material is presented in an interesting and accessible form, accompanied by methodological support: at the end of each topic there are questions and exercises for self-examination, contributing not only to a successful assessment of the degree of assimilation of the material, but also to the development of creative thinking; to determine the quality of mastering the material of the manual, test tasks with standards of answers will help to optimize the process of checking the completed tests and allowing you to more fully prepare for practical exercises, a list of check questions on the topic and a list of basic and additional literature, which will expand your knowledge of the material.

The study of the course "Sociology of Health" is aimed at the formation of students as universal competencies (UC), and general professional competences (GPC). UK–1: able to carry out a critical analysis of problem situations based on

a systematic approach, develop an action strategy UK–1.2: is able to get new knowledge based on analysis, synthesis, etc.; collect data on complex scientific problems related to the professional field; search for information and solutions based on action, experiment and experience UK–4: able to use modern communication technologies, including in foreign language (s), for academic and professional interaction. UK–4.1: knows: the basics of oral and written communication in Russian and foreign languages, functional styles of the native language, requirements for business communication, modern means of information and communication technologies. UK–4.2: knows how to: express their thoughts in Russian and foreign languages in business communication. UK–5: able to analyze and take into account the diversity of cultures in the process of intercultural interaction. UK–5.1: knows: the main categories of philosophy, the laws of historical development, the basics of intercultural communication; basic concepts of human interaction in an organization. UK–5.2: is able to: competently, clearly present professional information in the process of intercultural interaction; respect ethical norms and human rights; analyze the features of social interaction, taking into account national, ethnocultural, confessional characteristics. OPK–4: able to carry out and monitor the effectiveness of preventive measures, the formation of a healthy lifestyle and sanitary and hygienic education of the population. OPK–4.2: knows how to: conduct sanitary and hygienic education among children and adults (their legal representatives) and medical workers in order to form a healthy lifestyle and prevent the most common diseases; carry out sanitary and educational work among children and adults in order to form a healthy lifestyle and prevent the most common diseases; to form in children and adults (their legal representatives) behavior aimed at maintaining and increasing the level of somatic health; develop and implement programs for the formation of a healthy lifestyle, including programs for reducing alcohol and tobacco consumption, preventing and combating non-medical use of narcotic drugs and psychotropic substances; develop a plan of preventive measures and implement methods of group and individual prevention of the most common diseases; prescribe

preventive measures to patients, taking into account risk factors for the prevention and early detection of diseases, including cancer; carry out the selection and prescription of drugs and non-drug methods for the prevention of the most common diseases

The formation of these competencies will significantly expand the professional tools.

The high information content and methodological support of the textbook makes it easy to master the academic discipline and successfully pass the test.

CHAPTER I. HEALTH AS CONCRETELY — A HOLISTIC STATE HUMAN BIOSOCIAL ORGANIZATION

Questions to consider:

1. The unity of life, organism and health in the context of the interaction of the individual and the public in a person.
2. The concept of "state" in medicine, health care and philosophy.
3. Systemic patterns and determinations of health.
4. Features of determination in general human pathology.

Basic concepts: human health, philosophy of health and medicine, biosociality, individual health, public health, determinants of health.

1.1. THE UNITY OF LIFE, ORGANISM AND HEALTH IN THE CONTEXT OF THE INTERACTION OF THE INDIVIDUAL AND SOCIAL IN A PERSON

Human health as an object of socio-philosophical research, concretized in the subject as the interaction of factors of individual and public health and human life in the conditions of modern civilization, represents at least three complexly interrelated problems: firstly, it is the problem of the interaction of internal and external natural and socio-historical factors that determine the state of human life and health; secondly, the interrelation of factors of an individual's health, on the one hand, and public health, on the other, is considered; thirdly, human health and life in the conditions of modern civilization is investigated.

In the course of the study of these problems, the natural character of the multidimensionality, inconsistency and unity of biological, natural-ecological, social, cultural and historical factors of human health is revealed.

The multidimensionality and inconsistency of the health factors of a modern person is determined by the multidimensionality and inconsistency of the modern civilization of the natural-ecological and social processes occurring in it,

affecting the human body and his health. This pattern applies not only to Russia, but to the entire world community.

The interaction and interdependence of the individual and the public in human health is a concrete and holistic manifestation of his generic character - the collective, social nature of work and life and, accordingly, the unity of individual development (ontogenesis) and historical development (phylogenesis) of a person in his evolution. This regularity manifests itself in all aspects of socio-philosophical research - ontological, epistemological, value, ethical, aesthetic.

In the epistemological plan, on the subject of human life and health, the cognitive functions of the philosophical category "interaction", its connection with such fundamental categories as the existence of nature and man (society), universal connection and development, determination, material unity of life are revealed and concretized on Earth, self-organization of biological and biosocial matter.

The property of self-organization is the first, fundamental property of all living things, including humans. In human health, the property of self-organization creates and develops all other properties of life — consistency, metabolism, excitability as a reaction to information coming from internal and external influences, growth, reproduction, various forms of movement, adaptability to environmental conditions, etc. etc.

The most important property of life in general and of human life is its structuredness in a separate organism, the specific integral state of which is health. An organism is characterized by relative autonomy and, at the same time, life in a population, together with other organisms similar to itself, involvement in the process of evolution. Life outside the population, for a person — outside the collective (society) is impossible. This fundamental regularity of the organization of human life, like all life on Earth, determines the unity of his individual and public health and the unity of the individual and public in human health.

The concept of "individual health" means the state of health of a particular living individual. The concept of "public health" is an indicator of the state of

health of a society, a state that is known as a result of statistical generalization of health indicators of the aggregate set of individuals. In this sense, such an indicator of public health as average life expectancy is not suitable for characterizing the health of an individual. Each real individual has his own health, his own life expectancy. In this regard, the study of human health in the socio-philosophical aspect reveals the difference between the concept of "individual and public health" from the concept of "individual and public in human health". These concepts are related, but not identical. Before us is not just a correlation of linguistic elements, but semantic differences and interconnections of concepts.

Public in human health is the state of his health as a result of the impact of society on the health of the individual and the population, a complex, multidimensional and contradictory process of how socio-economic, political, health, socio-psychological, technogenic and other cultural and historical factors have certain, favorable or unfavorable, destructive or healing effects on human health.

We call the human body in the socio-philosophical aspect of health research a biosocial organization, referring it to both an individual and a population.

Health is a concrete, integral characteristic of all the properties of the life of an organism. Violation of at least one of the properties of life can lead to irreversible consequences for life as a whole. We consider the properties of factors of individual and public health in their interaction, in the process of which they are to a certain extent leveled out and act as a unity. We call this unity the biosocial organization of man. Man is the central and fundamental category of social philosophy.

The state of his biosocial organization has always interested a person: is everything in the body ordered, do all organs function in concert? Why is a person susceptible to disease? How, in what way, to ensure bodily and mental well-being in the body, which gives a person fullness and joy of being?

Specifically holistic, that is, a comprehensive and deep characteristic of the biosocial organization of a person are the concepts of "health", "state of the body", "disease", "pathology", which constitute the most important spectrum of the cognitive apparatus of a whole complex of sciences — medicine, biology, valeology and which complement, deepen the more general concept of "life".

Philosophy has always been interested in human health problems.

In gnoseological terms, health can be considered as an autonomous, independent phenomenon, but in the ontological terms it is inextricably linked with the body, with its structure and functions, with its anatomy and physiology, with its biosocial organization. There is no health outside and without an organism. It makes no sense to talk about health outside the existence of an organism. In reality, there is an organism and its definite state — health. The elementary logic here is that if there is no subject of judgment (the organism), then there can be no judgments about either health or disease. Before talking about health, we mean someone's health, that is, a characteristic of what exists, has the property of being. When a doctor says that this patient is sick, then in his words we find two inseparable sides of the phenomenon: first, the fact that the patient as a living organism really exists, and not only as a record in a medical record on paper, as a sign, symbol; secondly, objectively there are its properties, qualities, conditions (healthy, sick). Hence the indissoluble unity of the organism's being and its health.

An organism, as you know, is a living being that has a set of life properties that distinguish it from inanimate matter.

Thus, in our study, next to the concept of health, two more arise — the body and life. Life as a biological process can function, manifest itself only in the form of an organism of a separate, isolated integrity with its definite structure and functions.

The biological encyclopedic dictionary states that “in the broadest, most general sense, a living organism is“ any biological or bio-bone system consisting of interdependent and subordinate elements, the relationship of which and struc-

tural features are determined by their functioning as a whole. In this sense, the concept of "organism" includes not only individuals (individuals), but also colonies, families (in social animals), populations, biogeocenoses, etc. In a narrow sense, an organism is an individual, an individual, a "living being". In the new encyclopedic dictionary, in the definition of the concept of "organism", in addition to the above, it is written: "The formation of an integral organism is a process consisting of the differentiation of structures (cells , tissues, organs) and functions and their integration both in ontogeny and in phylogeny ". Thus, the individual development of life (ontogeny) of a person is organically involved not only in social, but also in historical development (phylogenesis).

Of the three indicated concepts — life, organism, human health as a biosocial being in the context of the logic of thinking, the most common and simple abstraction is life. However, this position of it is found only in the given sequential series of concepts. In the ontological aspect, life, as you know, is a concrete manifestation of the universal — the movement of matter, the biological form of movement and the corresponding level of its structural organization. In the epistemological aspect, this means that the place of the concept under study, reflecting a specific object in a number of other concepts, depends on whether the subject who knows it (the researcher) takes it as an initial category or among others.

In this case, the initial category for us is human health, which, together with the concept of an organism, is less abstract, more concrete than the concept of life.

In order to single out the category of human health and its specificity in the series of concepts "life" and "organism", we must compare their epistemological structures in interaction. What, then, will we find? Let us discover, firstly, that the concepts of life, organism, human health are of the same order, forming the core of the categorical structure of the integral concept of "life", since each of them gives us a characteristic of life as a form of motion of matter.

At the same time, each of them focuses our attention on a particular content of the concept. From the point of view of the ratio of the volume and con-

tent of the concept in logic, they are, as you know, in inverse proportional relationship. The concept of life in its scope covers all forms of life on Earth, but in terms of content it means only one property — its difference from the inanimate.

Secondly, the concept of an organism in its volume does not need to fix our attention on the difference between it and inanimate matter, since this function is performed by the concept of life, but in terms of content it is richer than the concept of life, it gives life its form, its structural -functional organization — from the body as a whole to its organs and other subsystems, including the deepest

elements — cells, their organelles (organelles) and molecular-atomic structures, while preserving all the properties of life, as it means creature.

Thirdly, the concept of health includes all the properties of life, all structural and functional interactions and states of the organism and, in addition to this, all its diseases, and for a person — all his suffering and joy, all the subtlest, deepest, more specific manifestations of biosociety. -al human being.

In the concept of health, we focus on those deep structural, functional and other manifestations of the life of the organism, which in their totality answer the question: what biomolecular, cellular, tissue and other formations inside the body and to what degree of completeness realize their functions? Why does the work of certain organs of our bodily organization cause anxiety, anxiety, pain, etc. in us? sensations and feelings limiting our biosocial freedom?

The answers to these questions are given by medicine, the main subject of which is human health and diseases, their causes (etiology) and recognition (diagnostics), methods and means of treatment (clinic, pharmacy, etc.), and the entire complex system of medical sciences. Relying on the general science of life — biology in all its complex, medicine deepens, concretizes our knowledge about life.

Both in a healthy and in a sick state, all structural elements of the body system serve the body as a whole. In a disease state, the body reacts in a certain way to negative, destructive influences on it from both intraorganismic and ex-

ternal extraorganic factors. When any organ becomes ill, not only the diseased organ, but the whole organism as an integral system acts against the disease-causing effects.

In this context, human health is a concrete integral characteristic of the life of an organism as a biosocial system.

In epistemological terms, in the concepts and categories we study, the attention of the cognizing subject is focused on certain sides of the object — in our study — life. The process of cognition moves either in the direction of abstraction, mentally distracting from its specific properties, connections, states, or in the direction of concretization, that is, from the abstract, mentally one-sided to its specific properties, to the consideration of the object in its integrity and the fullness of its mental definitions, which in theoretical knowledge is called the ascent from the abstract to the concrete.

With regard to the problem of life, organism, human health during the ascent of our cognizing thought from the abstract to the concrete, the cognizing subject (researcher) knows that the object (life) studied in the aspect of logic only in the most abstract image possesses a minimum of properties, and in its objective reality contains in all the variety of properties, connections, states, which are revealed in the consistently concretizing concepts of "organism" and "health". These principles of cognition correspond to the objective characteristics of life, body, health and the sequence of sciences, the subjects of which they are. This sequence of sciences can be schematically depicted as follows: general biology as the science of life — morphology as the science of the form and structure of organisms (with its anatomy, embryology, histology, cytology, etc.) — medicine with its sections as the science of health and diseases.

In the process of socio-philosophical research of such complex phenomena as life, organism, health, that common is revealed that unites, integrates them into an organic unity, and that specific that distinguishes each of them in relation to each other.

In the epistemological aspect, from the analysis of the volume and content of the concepts "life", "organism", "health", it is revealed that the completeness of the properties, connections, states of objects reflected by them can be deeper revealed not only in their differentiation, dismemberment, as well as in their comparison, interaction, as a result of which they, having integrated in the concept of life, become identical, enriched, and have reached their true essence.

In the ontological aspect, as a result of differentiation in the process of individual development of the organism (ontogenesis), initially identical, non-specialized cells of the embryo are transformed into specialized cells of tissues and organs. In phylogeny, differentiation (as opposed to the concept of “differentiation in ontogeny”) the division of a group of organisms into two or more in the process of evolution leads to an understanding of the most important phylogenetic differentiation — speciation, as well as the reverse tendency in the evolution of life — the process of species extinction.

Differentiation of concepts in the process of cognition of the structures of the life of an organism from a holistic person to microbiology and their simultaneous integration in general biology and then in philosophy reveal to us the interconnection of various levels of organization of life, allow us to better understand the processes of life development from simple to complex, from complex to simple.

A deeper study of life, organism, health, it becomes clear that each of these concepts, which make up the core of the categorical structure of life, has one more, revealing a qualitatively different, opposite side of it. This is how paired concepts arise: life — death, organism — environment, health — disease. Each side of the given pairs in relation to each other concretizes them, enriches them. It turns out that the organism as a carrier of life is mortal, that is, death is inherent in itself, it is encoded in the genetic program. At the same time, an organism cannot live, function without the environment, thanks to which it is involved in broader and more complex systems - biocenosis, biogeocenosis, noosphere.

The most complex epistemological structures of biology, biochemistry, anthropology, ecology, medicine, etc., containing in their totality tens of thousands of terms, concepts, categories, are collected around the core of the categorical structure under study — life, organism, health. In one medicine, there are more than 300 independent sections of knowledge, which testifies to the multidimensionality of the phenomena of life, the body, and human health.

The unity of life, organism and health presupposes the community and close interaction of their properties. How complex, multidimensional a person's life is, just as complex and multifaceted are the manifestations of his health.

This provision can be considered one of the important laws of human biosocial organization.

Multidimensionality in general health theory is closely related to the concepts of diversity and diversity. In systems theory, the concept of "complexity" is used, which is considered as a measure of the diversity of systems. All this indicates the closeness, kinship of the concepts of "multidimensionality" and "complexity". In the socio-philosophical study of health, multidimensionality is an important characteristic of the complexity of the human body and its states. It is not enough to connect the concept of complexity and multidimensionality only with the number of elements of the system. “A purely quantitative approach is very superficial, since it does not take into account, first, the interactions between elements, ie. specifics of the structure of the system. Secondly, in the course of development, individual subsystems are not simply combined into an integral system, but form a certain hierarchy of subsystems, each of which has some autonomy of functioning within the whole. Such hierarchically organized systems are inherent in just more complex forms of motion of matter. Their advantage over other systems is expressed, first of all, in the fact that they have sufficient time for development. "It is such a system, which has undergone a long evolution in its development, is a person with his body and his entire biosocial organization, including both the individual and his entire population. A

manifestation of this fundamental regularity is the unity of individual and public health and the unity of the individual and the public in it (in health).

In the above judgments about the specifics of a person, his body and health, our attention is drawn to another very important side of health — the epistemological task of its socio-philosophical definition. As you know, the definition of a concept (definition) is the most important prerequisite for scientific research.

In our study, the concept of "health", being the initial category of cognition, itself as a phenomenon and as an abstraction needs a philosophical definition (definition).

To do this, in judgments about the nature and specifics of health, whether in medicine, valeology or other subsystems of biomedical sciences, in sociology, philosophy, etc., taking into account the whole variety of its concrete holistic manifestations, one should find a frequently repeated essential term , which contains all the above properties, connections. Such a term is known, this "state".

1.2. THE CONCEPT OF "CONDITION" IN MEDICINE, HEALTH CARE AND PHILOSOPHY

The concept of "condition" has not only medical and health care, but also a philosophical status. The philosophical status of the concept under study, mainly on the analysis of general methodological problems of physics and sociology, is substantiated in the works of F.A. Aizyatova, A.L. Simanova and others.

In our work, we are interested in the philosophical and socio-philosophical aspect of the medical and health care characteristics of the “state” category.

In philosophical language, the concept of "state" is often used. F. Engels associates it with the law of mutual transformation of quantitative and qualitative changes. A.L. Simanov notes that in the “system of philosophical catego-

ries, the“ state ”occupies a special place. Corresponding to the category of quality, quantity and measure, the category "state" does not coincide with them, but highlights the main thing in these categories ... "

Academician O.V. Kerbikov also used the concept of "state", noting that "there are such quantitative shifts in which the possibility of returning to the previous qualitative state is not lost", that "... a transitional state, characteristic of the slow development of the disease, for stepwise or staged formation of a new quality, it can have great potential of complete reversibility, it can have the possibilities of only partial reversibility and can be completely deprived of these possibilities. Everything depends on the nature of the processes that unfold through qualitative shifts. "This is perfectly understandable. However, one important aspect of the "state" problem requires additional clarification. When they talk about the possibility of "returning to the previous qualitative state" in a sick organism, then this possibility should be considered from the standpoint of the philosophical categories "change", "development". Then the restoration of health, or its partial, complete loss turns out to be a "return to the previous qualitative state" only in the medical, pathological sense of the word. In the dialectical understanding, the indicated states of the organism, including the complete loss of the possibility of returning to the previous qualitative state, will be more correctly understood in the mainstream of the philosophical interpretation of irreversible changes. From the point of view of "return", the restoration of health as a result of healing is the moment of irreversible changes in the body. After all, no matter how we consider human health, it in indie form ultimately goes to death. But in this irreversible process there are transitional states, including diseases in the language of pathology and disability in the language of sociology, etc. This is how Hegel understood the problem under study. In his "Philosophy of Nature" in the section of organic matter, Hegel dwells in detail on the characteristics of the state of biological and social in the body and in paragraph "b 371–376" gives his understanding of life and death, "illness of the individual" and his "healing" ... Important for Hegel for our research is, in our opinion, an

indication that, firstly, he considers the human body as a complex system, and also calls its organs systems, which in modern language would mean subsystems in the system; secondly, Hegel proceeds from the possibility of "healing" the body, that is, the development of pathological processes in it towards the restoration of the functions of diseased organs.

The so-called "third state" should be included in the category of philosophical characteristics of health. As noted by I.V. Davydovskiy (1887–1968) in his famous work "Problems of causality in medicine", the state of health is not measured only by the alternative — "health or disease"."Between them is a whole gamut of intermediate states, indicating special forms of adaptation that are close to health, then to disease and yet are neither one nor the other." Here, it is not the problem of adaptation that is important to us, within the framework of which I.V. Davydovskiy, and the presence of facts of such a "third state" as neurasthenia, loss of appetite, irritability, headaches, dry skin and others characteristic of modern living conditions, which many researchers call "diseases of civilization." Similar symptoms are cited by the famous Bashkir scientist-doctor M.M. Gataullin in his book "Peace of mind".

The criteria of the "third state", which is becoming more widespread in modern conditions, in the age of industrial and information civilization, should be included in the indicators of the health of the population within the framework of social medicine.

The concept of "state" is legitimately used in modern legal documents regulating public health activities. For example, in the list of types of medical care, preventive and therapeutic and diagnostic measures and their volumes included in the Basic Program of Compulsory Medical Insurance of the Population of the Republic of Bashkortostan, indicated in Appendix No. 1 to the Resolution of the Cabinet of Ministers No. 34 of February 4, 1994 on the approval of the specified basic compulsory medical insurance program, it is written: “All citizens of the Republic of Bashkortostan are guaranteed: 1. Ambulance and emergency care in case of: 1.1. Sudden conditions and diseases that threaten the pa-

tient's life. 1.3. Childbirth and acute conditions during pregnancy. 1.5. Acute conditions of the patient that threaten the life and health of others "

From the text of the above examples, it is clear that the concept of "state" characterizes the state of the body not only in diseases and illnesses. "Sudden state" in our example is delimited from the concept of "illness", and this is understandable, because the concept of "state" is broader than medical terms and ascends to the heights of philosophical generalizations and can be applied to structural and functional states of any moment and sides of life and spheres human life.

It is no coincidence that the State Reports are devoted to the "state" of the population's health. The State Reports on the Sanitary and Epidemiological Situation also analyze "the state of the human environment and its impact on humans", "the sanitary condition of water bodies", "the sanitary condition of the soil", etc.

The modern understanding (concept) of the concept of "public health" is associated with the concept of a system, "information-entropy analysis", meaning that entropy here acts as a "quantitative measure of information and allows one to assess the degree of disorganization and disorder of various systems."

A state is a structural and functional characteristic of an object. The state of a biosocial organization as a system object in the framework of the general theory of the system means the moment of the functioning and development of the system, determined by the interaction of its internal elements.

A state is a structural and functional characteristic of an object. The state of a biosocial organization as a systemic object in the framework of the general theory of the system means the moment of functioning and development of the system, determined by the interaction of its internal elements of all levels within the measure at a given moment and external natural and social factors of human life.

In this regard, a disease, as a subject of medicine, is certainly such a state of the organism, when normal structural and functional processes in it, as a man-

ifestation of the unity of life, organism and health, are disturbed, become abnormal and can return the organic system to normal or, conversely, lead to a new state. — disability or even death.

Death is an eternal subject of human thought, as applied to an individual human body in accordance with the philosophical concept of “state”, it is a transition of an organism to a qualitatively different state — a complete loss of the properties of life. At the same time, the body loses its systemic properties (such as self-organization, metabolism and others), as a result, biosocial processes and functions of life pass into biological, biochemical, then into physicochemical processes, that is, along a descending line from higher levels of structural organization of matter to the lowest.

Two pairs of concepts — "life and death", "health and disease" reflect opposite processes, but at the same time are associated with the same phenomenon — human life. These concepts are of fundamental importance in medicine, the practice of a physician and in all health care activities of society. It is from these positions that we consider the methodological function of the concept of "state" to determine the fundamental category of medicine, which is the concept of "health".

In the preamble to the Constitution of the World Health Organization (WHO), human health is defined as "a state of complete physical, spiritual and social well-being, and not just the absence of disease and physical defects."

Before us is a completely clear, purely axiological and sociological definition of health as an ideal, which humanity has always strived for throughout its history.

The status of the World Health Organization, representing medicine in the human community and appealing to states and governments, obliges to focus the attention of the cognizing subject on the social value of health, that is, to emphasize only the positive, the ideal. This understanding of health is fully consistent with axiology — one of the branches of philosophy that studies the nature of

values, among which health is classified as a natural and lasting value in life, which occupies "the highest level on the hierarchical ladder of values."

If the term "state" is removed from the WHO definition of human health, then nothing will change in the content of the concept of "health": we will get that health is "complete physical, spiritual and social well-being, and not just the absence of diseases and physical defects."

The words "well-being, and not just the absence of disease and physical defects" emphasize the absolute nature of the given definition of health. Meanwhile, in practical medicine, which is reflected in the "State reports on the state of health of the population of the Russian Federation", the concept of "state of health" includes a whole complex (list) of diseases detected during the year. This is understandable: health as a concrete integral characteristic of the life of an organism in the real life of a person (both an individual and a population) rarely manifests itself as an absolute absence of diseases and physical defects.

The concept of well-being characterizes only one side of the state of the organism, the first stage or moment of life of living beings, including humans, after birth. We call this stage a period of progressive development, interpreting the concept of "development" as the accumulation and conservation of life energy. At the same time, there exists and irreversibly begins the stage of extinction of life, which ends with death. Philosophy in its relation to the individual life of a person cannot proceed only from a subjective desire for eternal health and well-being. It is obliged to proceed from the universal, extremely complete in its versatility, objective characteristics of the health and life of a person and the natural finiteness of the life of the individual and the continuation of the life of the race. And the socio-philosophical definition of health cannot ignore this regularity of living things in ontogeny and phylogenesis.

Philosophy has never refused to use natural language when necessary. In the Russian language, the word prosperity is formed, collected from two words — to receive benefit, of course, and good health. However, well-being is an axiological concept that characterizes the value of health without any incon-

sistency, and in real life such a state of health is rare. Disease-causing viruses, bacteria and other phenomena surrounding a person interact with the body of any individual, regardless of whether he has complete physical, mental and social well-being or poor health. He may not get sick due to the body's higher resistance (resistance) to diseases than other people. Physical health is characterized primarily by the biological and mental state of the body, but not always social. The unemployed, refugees, imprisoned criminals can be quite biologically and mentally healthy, but their health can hardly be characterized as complete social well-being. At the same time, it is clear that a long duration of social distress can weaken the mental, and then gradually the physical health of a person.

In addition, in defining the concept of "health" one has to be careful in its interpretation (interpretation) in the context of linguistic correlation. It is inappropriate to identify the concept of "health" with the concept of "healthy", which is not the same thing. When we say about a specific individual that "he is healthy", it means that "his health is good." However, it is completely different when they say: “his health is unimportant,” or “his health is poor,” which confirms the incorrectness of the identification of the concepts of “healthy” and “health”. From the point of view of the logic and grammar of the language, here in the first case we are dealing with a predicate - a predicate, a positive assessment of the subject of judgment — an organism, in the second — with a neutral noun, in its grammatical metamorphosis acting as a subject of further, deeper and more concrete judgments. deny about the body. And in the course of these more specific judgments, the essence of the state of the organism is revealed, which consists in the fact that its (organism's) health can be both "good" and "bad", that is, it contains a unity of contradictory possibilities: the ability to maintain healthy health and the possibility of getting sick and even die.

The dialectic of the opposition of the categories "possibility" and "reality" interested many thinkers, in particular, V.I. Lenin. Describing the spontaneous dialectics of Aristotle, Lenin remarked: “The question of how the matter of one thing or another relates to the opposite is difficult. For example, if any body is

healthy in its potency, and disease is opposed to health, then is the body both in possibility? Further, is not a living person in possibility dead? "

In his logic of judgments, Aristotle believed that in accordance with the law of contradiction about the same in the same respect and at the same time, it is impossible to express opposite judgments. However, Aristotle “gave this law three different meanings: ontological, epistemological, logical. At the level of possibility, potentially, this law does not work (in a possibility, a person can be both sick and healthy; in fact, it is actual, he is either healthy or sick.”

The interaction of the opposites of life and death, health and disease, reasonably causes another, close to the topic under discussion, the problem of reversibility and irreversibility in a living system. The patient's recovery process can be considered a reversibility of health. But in the context of the opposition between life and death of an individual, this reversibility does not eliminate the laws of his death. The limited life of an individual by programmed time in a thinking person gives rise to a philosophical question about the meaning of life, flowing in an instant compared to eternity. The experiences of the short duration of life in ontogenesis are purely individual. The inevitability of death frightens someone, worries another, encourages a third to philosophical reflections on the cost of life, etc.

The absolute value of health for the fullness of life is revealed in its opposition to diseases to which the body is susceptible. If health was never threatened, then its value would be relative. We derive this position from a more general principle: a person begins to understand the absolute value of health as the basis of a full-blooded life only when he (an individual) comprehends the truth about the short-term nature and finiteness of life. This principle takes its place in the psychological and world outlook approaches to human health, in the historical and cultural development of society and is important in defining the concepts of "state of health of an individual" and "state of public health".

In the study of such a complex phenomenon as human health, the state of his body, a huge role is played by the aspect in which the research is carried out.

Each definition of concepts that reflect a particular state of the human body may be correct in the aspect under study. Arguments are useless when aspects that concretize the subject of scientific research are not taken into account.

In interpreting the concept of "health" through the category of "state", we agree with the statement of G.L. Apanasenko and L.A. Popova is that “there are transitional states between health and illness. At the same time, health is considered as a more general category in comparison with pre-illness and illness. Pre-illness (“third state”) and illness is a particular case of health, when its level is lowered or there are defects. The approach to a person and his health used in valeology is integrative (systemic), cholestic (holistic)." “When considering the categories“ health ”and“ disease ”, one should take into account the position expressed by one of the founders of Russian pathophysiology V.V. Podvysotsky. He argues that absolute illness and absolute health are inconceivable, between them there are an infinite number of forms of connections and mutual transitions. The same idea was confirmed by A.A. Bogomolets, who back in the 30s formulated a provision on the unity of norm and pathology, in which “the first includes the second as its own contradiction. Such an approach to the definition of the concept of "health" from the standpoint of medical norms and pathology is also supported by the well-known authorities of medical science F.I. Komarov, V.P. Petlenko, I.A. Shamov, noting at the same time that "health and disease are broader concepts than norm and pathology." Here we consider the problem of human health as a contradictory, multidimensional and concrete-holistic state of his biosocial organization in terms of both individual and population (public) health. The fact that the concept of "state of health" reflects the multidimensionality and contradictory nature of the functioning of the human body is confirmed by the "acute emergency conditions" that clinical medicine and diagnostics deal with.

There are at least 66 known medical emergencies in emergency medical practice. Common acute emergencies are associated with the following diseases: heart disease, hypertension, diabetes mellitus, renal colic, urinary retention, anu-

ria, etc. Acute emergency conditions arise from the defeat of the population in natural disasters and catastrophes.

Acute conditions arise from the vulnerability of human health.

Most often, they are caused by complications, when one violation of the body's stability causes another, as a result, a conjugate interaction of several diseases is formed.

From the listed most common acute emergency conditions of the human body, it can be noted that the concept of "state" means, firstly, the structural and functional characteristics of the brain, heart, kidneys, lungs and other vital organs of a person as macroelements of the biosocial system. Secondly, acute emergencies are called because of their pathological nature, which indicates their connection with the concept of "health", in relation to which they represent one of the ways to protect the body from damage, that is, from processes opposite to health in the body. Thirdly, attention is drawn to a wide variety of "acute emergency conditions", conjugation, complementarity of two or more diseases, which indicates the multidimensionality of the state of the body, the relative nature of health stability, its vulnerability.

Human health can be studied in biological, genetic, medical, valeological, sociological, axiological, philosophical, etc. aspects; and, accordingly, each of the sciences gives its own definition (definition) of health. Social philosophy should find its definition of human health, based on already recognized functions: to find the general-specific and concrete-holistic (health), taking into account its biological nature and social essence, taken in their interaction.

In relation to health, the concept of a state also implies a characteristic of the organism of a particular individual, the population of a particular country for a certain moment or period of time, that is, as being in constant change in space and time. And we call the sequential regularity of the change of states in the development of the organism of the individual and the population a biosocial process (“disease process”, “lung process”, changes occurring in the “state of health of the population”).

The state of the organism is not only something given as a result of previous development, but it is simultaneously becoming, since we are talking about a time factor, due to the effect of which on the human body in ontogeny and phylogeny, the structural and functional organization of the physiological substrate is observed not as a statistical -anatomical, but as a functional-dynamic process. Consideration of the state as a process in progress is in full agreement with the conclusions of I.M. Sechenov, I.P. Pavlova, N.E. Vvedensky and A.A. Ukhtomsky about the connection between the transition from the statistical-anatomical understanding of the structural-functional organization of the physiological substrate to the functional-dynamic one with the consistent implementation of the principle of historicism and the disclosure of the actual role of the time factor in physiology.

The concept of a state in terms of embracing the entire variety of objects, phenomena and processes both in nature and in society is related to the concepts of movement, interaction. The state of movement and the state of rest are the most common concepts in the characterization of biological systems. For example, sleep is called the state of rest of the body, wakefulness is called a dynamic state, or a state of movement. But what is sleep as peace? In a state of sleep, all organs, all cells with their micro- and macrosystems work, function: the heart makes about 35,000 beats in 8 hours of sleep, the lungs about 15,000 breaths and exhalations. Being in a state of wakefulness and sleep, the lungs, heart and other organs of the human body, cells, biological molecules in a living organism continuously interact with each other, thereby providing various states of the organism as a whole, its life processes. Thus, interaction, movement, state are phenomena and processes that condition each other. In philosophical thinking, they are the most important categories.

Fully agreeing with the definitions of the concept of "human health", in its specific aspect indicating that health is not only a certain state of the body, but also the ability to satisfy the system of its material and spiritual needs, we also draw attention to the fundamental mechanism for ensuring this ability ... Such a

mechanism is undoubtedly the interaction in the human body of its internal and external environment. Taking into account the foregoing, the most general definition of a person's health will be a specific holistic state of his biosocial organization, conditioned by the interaction of internal and external factors of vital activity.

Social philosophy certainly presupposes the worldview aspect of a person's attitude to life and health, his deep reflections on the short duration of life, the mystery of death and the associated choice of biosocial behavior, lifestyle, etc. In order to find answers, it is legitimate to rely not only on philosophical categories proper, but also on natural-scientific concepts, the search for new categories that reflect the nature of human biosocial nature. As a new category epistemologically justified can be the concept of "the period of progressive and sustainable development of the life of an individual" in a healthy organism. The use of this concept allows us to make a significant remark that the life of a human individual and his health are not free from the influence of one of the basic laws of thermodynamics known in science - the second law of thermodynamics, that it is impossible to build a "perpetual motion machine" (VF Ostwald) not only in mechanics, but also in human biology. However, during the period of progressive and sustainable development of the life of a healthy individual (until old age or death from disease), the body as an open system is actively producing energy at a level exceeding the level of entropy. After the period of progressive and sustainable development of life, there comes a period of decrepitude and weakening of the energy of life.

The continuation of the life of the human race, in contrast to the life of the individual, in the context of the category of “life activity of the genus” in its depth is not free from the operation of the fundamental law of conservation of energy in nature (YM Mayer, 1842). In biological matter, as a result of the interaction of masculine and feminine principles, the life energy of the child's parents becomes an impulse for the birth and development of a new generation of biosocial life. This phenomenon is a moment of self-organization of life with the sim-

ultaneous action of the law of conservation of energy in the biosocial system. In the human body, the law of conservation of energy is due to its qualitative specificity — the law of interconversion of types of energy — mechanical, physical, chemical, biochemical, biological, social and socio-spiritual as a result of their interaction.

The following conclusion follows from what has been said: the connection and interaction of natural science with philosophy in the study of the problem of worldview factors of human health becomes the most important need in modern society.

Taking into account the latest ideas about the philosophical foundations of the category "man", its biosocial organization, the achievements of biological, medical sciences, sociology, valeology, medical genetics, etc. to conclude our study of the problem of the definition of health, an approximately adequate socio-philosophical definition of the concept of "human health" can be given. In the socio-philosophical aspect, human health is a concrete-holistic, multidimensional, contradictory state of his biosocial organization as a manifestation of all the properties of life, conditioned by the interaction of internal and external factors of life and the corresponding structural-functional, material-energy and information processes at each given stage and level of its genetic, ecological, cultural-historical development both in ontogenesis and in phylogenesis.

This definition can serve as a starting point for the continuation of the socio-philosophical study of the problem of the health factors of a modern person.

1.3. SYSTEMIC PATTERNS AND DETERMINATIONS OF HEALTH

The systemic nature of regularities and determinations in the structure of human health is taken into account, first of all, in medicine, but in the socio-philosophical plan, they are just beginning to study. It is about the methodological role of philosophy in relation to medicine, biology and other health sciences.

“Advancement of human health among the priority tasks of social development,” writes N.M. Martynov, — determines the relevance of the theoretical and methodological understanding of this phenomenon, shows the need for the deployment of appropriate scientific research, including at the philosophical level. "

Another famous scientist on the problem of man I.I. Brekhman wrote that “For the solution of all scientific and practical issues of health, the modern definition of the very concept (phenomenon) of health is of paramount importance ... In the literature, you can find a lot of definitions of health. For a philosophical consideration of health, it is important to understand that it reflects a necessity arising from the essence of phenomena, and a disease is an accident that does not have a universal character. Modern medicine deals mainly with random phenomena — diseases, and not with health, which is natural and necessary”.

Regarding the above judgments about the philosophical problem of the need and chance in the study of health, the authors of this manual consider it necessary to express their judgment. .d. At the same time, one cannot but take into account that since the disease acts as a factor in the disorganization of the functioning of the psychosomatic system, it is opposite to health, which is a factor of internally necessary, essential self-regulation of the body. However, when a disease has arisen and began to function, it becomes an integral part of the life of the organism as a whole and in its development obeys certain objective laws. In this regard, medicine is already dealing with these objective laws.

V.M. Dilman, who writes that "... if the stability of the internal sphere of the organism is the law of the organism's existence, then the programmed violation of stability is the law of the organism's development." The point is that stability in the context of the development of an organism is accompanied by natural disturbances.

Regularity, determination take place in both respects: when we are dealing with necessity, and when with chance. Medicine is a science that deals with the

entire set of infinitely complex connections of the biosocial structure of a person.

At the same time, one must agree with I.I. Brechman in his proposal to focus the attention of health researchers on preventive medicine.

The above judgments of the authors dealing with the problem of human health show the need for broader, philosophical generalizations and approach to medicine and health care.

However, it is wrong to think that only philosophy helps medicine. It can be said with the same reason that medicine and the entire complex of biological and other sciences provide the richest material for clarifying and deepening philosophical principles and categories.

Taking as a subject of research the problem of interaction of health factors of a modern person and looking at them from the standpoint of a concrete, integral characteristic of it, we will continue their study from the standpoint of systemic patterns and determinations. In the presented biosocial system, we consider at least two groups of factors: biological and social, taking into account the dual — biological and social nature of man. For centuries, physicians-philosophers, studying a person and his body, proceeded from the integral characteristics of health, but their understanding of integrity was conditioned by the concrete historical level of experience and scientific knowledge.

The ancient Greek philosophers Alkemon from Croton (6–5 centuries BC), Empedocles (490–430 BC), Hippocrates (c. 460–377 BC).

"The most universal head of ancient Greek thinkers", according to F. Engels, Stagirat Aristotle, a doctor by training, for the first time in medicine showed a philosophical understanding of the integrity of a living organism, the close interaction of its organs, their forms and functions, as well as the unity and opposition of life and death, health and disease, organism and environment, health and lifestyle.

One of the greatest physicians-scientists of the medieval East, Abu Ali Ibn Sina (Avicenna), also expressed conjectures about the integral biosocial nature

of human health. It is important to clarify the task of our research that the writings of the named great scientist of the early Middle Ages do not yet pose the question of human health as a biosocial system, which is an element of the social system as a whole and functions within its framework, but there are brilliant guesses about this.

The modern general theory of the system in philosophy, as you know, was created only by the middle of the 20th century.

The creation of a general theory of the system, a systematic approach in epistemology was preceded by the efforts of scientists from many branches of science, primarily biology, medicine, and social philosophy.

A significant contribution to the development of systems theory was made by Russian medical scientists. Scientific works in Russia devoted to various problems of medicine and health care, the human body and its health and the practice of organizing a medical service are approached taking into account the systemic nature of the object under study. “The body is a complex system,” write the authors of the book “A healthy lifestyle is the guarantee of health” and quote the well-known words of I.P. Pavlova that the organism is "an extremely self-regulating, self-supporting, restoring, guiding and even improving system." To the words of the famous Russian neurophysiologist I.P. Pavlova, taking into account the modern achievements of medicine and systems theory, it can be added that the Russian physiologist, as it were, anticipated the emergence of the modern theory of self-organization — synergetics.

L.G. Baimbetov, A.I. Ishmukhametov, researching the spa treatment of the digestive system, proceed from the systemic nature of the human body and the need for “stage-by-stage treatment of diseases”.

Human health research can be conducted from various structural levels and aspects of biosocial organization and, accordingly, from various scientific points of view - molecular genetic, anatomical and physiological, microbiological, general pathology, etc.

Philosophical reflections tend to a higher level of generalization. Modern philosophy itself has a complex structure. For example, from the point of view of general dialectical connections, the health of the individual and the population can be approached at the level of determining the integrity of health, its structure, causality, reactivity, genetic and other regular relationships. You can also approach from the position of information theory, from the position of sociology, culture, psychology, ethics and aesthetics, and, finally, economics and law. Since each of the approaches reveals one or another side of health as a holistic education, then as a heuristic prerequisite for research, these sides can be considered as elements of the biosocial system.

When famous doctors and philosophers A.I. Strukov, V.V. Serov, D.S. Sarkisov write that health is "a normal psycho-somatic state and a person's ability to optimally satisfy the system of material and spiritual needs," then the recognition of the systemic nature of health is quite visible. Consistency reveals itself in considering health as the integrity of two structures — mental and somatic, and as their ability to optimally satisfy the "system of material and spiritual needs." Health as a systemic condition and health as a systemic ability to satisfy. The determination here is as follows: the ability to satisfy the system of needs is due to the normal or abnormal psychosomatic state of the organism as a whole. Before us is a system with a very complex structure: after all, already the psychosomatic structure of the human body consists of rather complex mental and somatic structures, not to mention the structure of the material and spiritual needs of a person.

The concept of "health structure" is closely related to the concepts of "state of the body", "health factors". The structure of health in its depth is made up of molecular genetic, intercellular and other anatomical, physiological and social interactions, which in biology are called physiological acts. These interactions, taken together, constitute vital processes and the state of the organism. The concept of "factors" means the processes occurring inside the human body and in the external natural and social environment and affecting it (the body),

causing it to be favorable or unfavorable for life and health. In the epistemological aspect, here the main role in the definition of the concept of "factors" is played by the term "impact" in the sense that it is incorrect to use the concept of "factors" without influencing the subject under study.

The problems of researching human health activities and the forms of its organization, the theoretical and philosophical basis of which is the concept of the substantial biosocial and specifically holistic nature of human health, are closely related to the problem of the interaction of external and internal determinants of changes in the body and human health. In the studied interaction of factors, it is wrong to recognize the decisive role only of the internal reactive forces of the living.

Internal forces are the physical and spiritual forces of a person conditioned by the genotype, which make a person healthy or sick, strong, weak or average, etc. External forces are such socio-economic, political, environmental factors that create an environment for the individual and the whole society, and which, in extreme conditions, can affect the genotype and personal qualities of a person. It is also the so-called passionarity, capable of forming a socio-historical attitude and type of behavior in society, inspiring masses of people to destruction or inactivity, captivating them with utopia or, conversely, with the idea of creation. The dialectical regularity here manifests itself in the fact that external conditions, thanks to the prevailing concrete historical conditions, can be mastered by people and turned into their internal creative or destructive forces.

The universe is based on interaction. In nature, the interacting parties can be equal or different in the strength of their influence on each other. As a result of man's assimilation of the forces of nature, nature as an external environment and force becomes his internal force. If these conditions are violated, unwanted mutations may occur. This is confirmed by modern genetic monitoring for dominant mutations that cause defects in intrauterine development.

The studies of doctors have also shown that violations of the biological and social conditions of the normal formation of a child in the prenatal and post-

partum periods cause qualitative deviations from the requirements of the biological law, lead to an increase in diseases both in expectant mothers and in their children.

As you can see, connections and interactions in the human body (biosocial organization) are so complex that they require the finest semiotic and grammatical correlations.

In the cognitive process, considering scientific principles, categories, concepts, theories, we only tear them apart in thoughts. In real life, the connections reflected by them exist, function in interaction, manifesting themselves as the infinite diversity of the world.

In studies of the methodological problems of medicine, they often rely on the determinative concept of human diseases, which was once created and formulated by V.P. Petlenko, A.I. Strukov, O. K. Khmelnitsky. This concept includes the following principles:

a) evolutionary determinism, during which the adaptive capabilities, adaptive mechanisms of a living organism were improved, changed;

b) system-level determinism, recognition of the systemic as well as level integrity of the organism, covering all connections and relationships between living and the environment;

c) reactive determinism — recognition of a genetically determined reaction rate, which determines the measure of the organism's compensatory capabilities in response to environmental influences;

d) morphological determinism — recognition of the causality of all manifestations of the disease and the qualitative specificity for each disease.

Point "d" of the group of pathological determinations draws attention: here we are talking about the structures and forms of a living organism as a self-regulating system that has undergone a disease. This conclusion is also confirmed by the wording of point "b" — system-level determinism. We understand it in such a way that a disease can occur at any level of the organism as a living system and causes a response from the whole organism as a whole.

The cited scientists in the same work on reactive determinism write: "The specificity of biological response, according to Engels, is that in the interaction of an organism with the environment, a living system has an independent reaction force." The authors confirm this position with the following formulation: “A living system is a genetically self-reproducing reactive system capable of preserving its morphological structure and actively adapting to the environment through a system of self-regulation mechanisms. A living system is capable of perceiving, storing, transforming external information, matter, energy and actively reacting to them with a system of adaptive mechanisms. It is these features of reactivity that make it possible to ascribe to it the status of lawfulness. "

From the above formulations it follows that 1) pathological determinism is associated with the principle of biological consistency (an organism as a system); 2) that the principle of the organism's reactivity as a system interacts with genetic determinism, which determines the functioning of the system of self-regulation mechanisms and, thus, adapts the living system to the environment.

The principle of determinism in the pathological process interacts with the principles of information content of living systems.

Thus, pathological determinism acts in a biological system and is a concrete expression of biological determinism, and the latter is a concretization of philosophical, dialectical-materialistic determinism in a living system.

Determination factors in the general theory of health can be divided into initial (initial) and subsequent new (complementary) ones. Initial factors, for example, in the theory of pathology, are causes that directly cause or contribute to the onset of a disease. Subsequent factors are a consequence of the initial factor, which itself becomes a factor in subsequent changes in the process, phenomenon. In the theory of pathology, as you know, smoking abuse contributes to the occurrence of heart or lung diseases and is, in our example, the initial factor of changes in the body. Bronchopulmonary diseases, once arising under the influence of smoking, themselves become factors of subsequent changes in the body that can destroy its life.

Medicine intervenes in the process of the disease, it carries out treatment, which in this case acts as a new (complementary) factor. Before us is a multifactorial process, which is the subject of philosophical analysis.

Any process of human life in the context of health is multifactorial. And each factor, whether it is initial (initial), subsequent or new (complementary), is a determinant (conditioning) of further, subsequent changes in the studied process, phenomenon, in our study — human health.

In the first half of the twentieth century, thanks to the success of medicine, cases of cholera and other infections of this type were greatly reduced. At the end of the 20th century and the beginning of the 21st century, bird flu, atypical (atypical) pneumonia and other previously unknown and little-known diseases that are dangerous to humans appear. In this case, we can talk about nosological factors of health that determine (determine) the state of health with specific types of diseases. In this context, we can talk about nosological determinism.

The specificity of nosological determinism in health theory lies in the difficulty of determining what specific diseases in his life this individual can or will get sick and what the degree of prevalence of specific types of diseases among a given population may be. This is where the interaction of individual and public health and the diffusion (dispersal, spread) of infectious diseases are manifested.

The infinity of modifications of organic forms of antigens and the uncertainty, random, probabilistic nature of the occurrence of specific mutations (changes in the body) confirms the uncertainty of nosological determinism. This conclusion confirms the concept of synergetics.

The population consists of a huge number of individuals, and each of them has their own health, their own diseases. There is no stable, linear recurrence, objectively there is an indefinite multiplicity of nosological determinism. Natural and anthropogenic factors of health determination are distinguished by even greater uncertainty. It is difficult to foresee and determine what natural disasters, anthropogenic pollution of air, water, food, technical disasters and acci-

dents will be in the next year, in the next decade, and what the degree and forms of disability and occupational diseases among individuals and the population will be in connection with them.

These new phenomena necessitate an increase in the role of medicine as a science. This need acts as a regularity. We can say that a new stage has begun in the development of modern medical science and health care: health factors as objects and objects of their activity reveal not only systemicity, but also non-stability, nonlinearity of impact on human health. In such conditions, in the methodology of medicine and health care, the principles of consistency, system-functional analysis, as well as other principles of general methodological analysis of biological and biosocial systems are supplemented by the principles of instability and nonlinearity.

The laws and regularities of preserving human health in the process of his socio-historical development can be revealed only by applying in a complex all general philosophical and specific scientific principles.

1.4. FEATURES OF DETERMINATIONS IN GENERAL HUMAN PATHOLOGY

Determinism (from Lat. Determinare — to define, in Russian — to condition), as you know, the doctrine of the universal universal conditioning of processes and phenomena. In modern philosophy, it includes the whole range of connections between cause and effect, necessity and chance, linearity and nonlinearity, possibility and reality, the system and its structural elements.

In modern philosophy, various points of view are expressed regarding the problem of determinations. From the point of view of I.R. Prigogine (1917–2003) “the essence of the scientific revolution taking place today is that modern science refutes determinism and insists that creativity manifests itself at any level of natural organization. Nature contains instability as an essential element, as a rule, there is not a single bifurcation, but whole cascades of bifurcations, as a

result of which new macrostructures arise, so we cannot predict what will happen; the future is open. "

Meanwhile, the “synergetic model” of the creator of the science of synergetics Hermann Haken (b. 1927) “for the formation of coherent (coordinated — Iv.) Behavior of elements (self-organization) includes three most important concepts: order parameters, the principle of subordination, cyclic causality”, i.e. determination. G. Haken takes the determination in the most general form, stresses that "there are the same principles of self-organization of systems of different structures, from electrons to people."

Since the human body belongs to complex systems, the principle of determinism, as we proved in the previous paragraph, has not lost its productive epistemological, epistemological role. In the process of maintaining both the equilibrium (homeostasis) and non-equilibrium (pathological) state of the human body, its health, whole cascades of bifurcations and overcoming instability, restoration of stability, orderliness, the normal state of the body, and its health can take place. The only difficulty in this reasoning lies in the disclosure of the concepts of "normal" or "pathological" state of the organism as a system in the context of synergetics. After all, the system itself has the property of determinations. Of course, modern philosophy has to reconcile the medical concepts of homeostasis, norm, pathology, health, disease with such concepts of synergetics as order and chaos, equilibrium and disequilibrium, etc. We recognize homeostasis for the stability of the system. Moreover, any equilibrium process is reversible.

In the process of analyzing systemic patterns and determinations above, we showed the existence of uncertainty in the processes of nosological determinations. In living, organic systems, there can be a variety of determinations. Diversity, multidimensionality, complexity, contradictions, being present in public health as general features of pathological processes, are much richer, deeper in their uniqueness in the health of an individual.

Modern concepts of determinism in the philosophy of human health differ significantly from the period when nosology finally took shape in the 19th century — the doctrine of the existence of specific diseases, each of which has its own cause, development mechanism and its inherent clinical and anatomical picture. This line of medical research, later called private pathology, turned out to be only an early stage in the study of disease. It turned out that there is a complex of so-called typical reactions of the body, with the help of which it reacts to the action of a variety of pathogenic factors and adapts (adapts) to them.

This is how the general human pathology arose — the doctrine of the most general patterns of pathological processes that underlie any disease, the doctrine that the authorities of general human pathology call "the algebra of medicine", its philosophy. This very "algebra of medicine", in other words, in our study, the philosophy of pathology is inherent in public health. The concept of "public health" is abstracted from the endless nosological diversity of the health of individuals, focusing only on the general properties of pathological processes.

At the same time, the general pathology is not divorced from the pathology of the individual, which is much richer than the general pathology. At the same time, in general pathology, the most stable properties of the human body are fixed, which are manifested both in a healthy and in a sick state.

The history of general pathology and, accordingly, the developing concepts of determinism in medicine have gone a difficult path from the first complexes of knowledge about the human body, studied by anatomy and physiology, to the emergence of pathological anatomy, aimed at studying the role of forms and structure of the body (morphology) in the manifestations of diseases, and pathological physiology (functional), as well as pathological chemistry, which later became biochemistry. The development of the latter was already based not only on clinical medicine (i.e., the practice of treating patients) but also on experiments.

In the second half of the 19th century, as a result of the rapid development of a new science — microbiology, a clear delineation of various areas of medicine was replaced by the recognition that “there is a single material substrate for the manifestations of vital activity, including the entire range of levels of organization from molecular to organismic, and that there is no, even the smallest functional changes cannot arise and disappear without being reflected in the corresponding structural changes at the molecular or ultrastructural level ... and that after a long period of artificial division of vital processes into "structure and function" we gradually move on to studying them as integral phenomena, that is, such as they really are."

These scientific provisions significantly deepened the understanding of the processes of interaction of various factors in the human body at all levels of its biosocial organization and in general human pathology were called the "determinative concept of human diseases", on the characteristics of which we have already stopped in the previous paragraph.

Modern general human pathology from the methodological level analyzes and summarizes such processes as cell pathology, dystrophies, necrosis, circulatory disorders, pathology of resuscitation and intensive care, inflammation, immunopathology, sclerotic processes, congenital malformations, adaptive and compensatory processes, tumor growth ... At the same time, it (general pathology) summarizes the factual data of biochemical, morphological, genetic, pathophysiological and other studies to form a holistic view of the patterns of work of a particular organ and organism as a whole in various diseases, and also reveals the philosophical and methodological aspects of biology and medicine: problems relationships between structure and function, part and whole, internal and external, determinism, the integrity of the organism, nervousism, etc. Methodological analysis of the pathological processes noted above following one after another will begin with the pathology of the cell, which is an elementary living system that has the ability to exchange with the environment, self-reproduction and development.

Important in the analysis from a philosophical point of view in the cell is the relationship of its structure and functions.

In philosophy, "structure and function", as you know, are the concepts of systems analysis. The structure of a living system means combining its parts in such a way as to ensure maximum adaptability to the conditions of existence and action, optimally economical performance by parts of the whole of their functions, that is, their interaction for the preservation and reproduction of the activity of the system. In biology and medicine, the structures of the body are studied by anatomy, pathological anatomy, physiology, pathological physiology, cytology, etc. The functioning of a living system is called the processes of interaction between its elements and the various (healthy or sick) states of the organism caused by them and its development in onto — and phylogeny. These provisions are directly and primarily related to the cell as a living system.

The norm in the life of a cell is not only the presence of all its structural elements, but also their ability to perform their inherent functions. Outside, the cell is covered with a cellular, or plasma, membrane (membrane), which has a complex structure. Inside the cell (in its cytoplasm), the cell nucleus and other important structural formations are organelles that have morphological features and provide the main manifestations of the cell's vital activity. “Cytoplasm is a complex heterogeneous colloidal membrane system formed by proteins, nucleic acids, lipids, carbohydrates and inorganic compounds. It contains specialized structures that perform such specific functions as the synthesis and metabolism of many substances (proteins, lipids, carbohydrates, vitamins, enzymes), respiration and energy production, intracellular digestion, etc."

Modern sciences about cells (cytology) and tissues of multicellular animals and humans (histology), as well as a science that studies the features of the structure of the body, its individual organs, tissues and cells in the process of functioning and development in health and disease (morphology) give us ideas and knowledge about the huge variety of forms, structures and functions of the cell, the laws of their interaction.

As is known, the processing, storage and transmission of information necessary for the coordination of the work of various tissues of a multicellular organism is carried out along certain paths by the cells of the nervous tissue, or neurons. The latter in the human body as a whole are the structural units of the nervous system. The mechanism of activity of the nervous system and the principles of processing information in it are studied by neurophysiology — one of the branches of neurology, biomedical science, which studies the structure and functions of the nervous system in health and disease, the patterns of development of the nervous system and develops methods for recognizing, treating and preventing its diseases. Neurophysiology (or, as it is sometimes called, neuroscience), which deals with the informational properties and functions of the human nervous system, is close to philosophy in the subject of study, and neuroscience is close to general human pathology. Nervous regulation is the highest stage in the development of the body's adaptation to changing environmental conditions.

Philosophy and general human pathology complement each other. And particular pathologies provide enormous material both for general pathology and for philosophical reflections. In this respect, for example, a complex of types of dystrophies is characteristic, which are the result of disorders of tissue (cellular) metabolism, leading to structural changes in the body. Dystrophies are considered as one of the types of damage. The immediate cause of the development of dystrophies can be violations of the cellular or extracellular mechanisms of trophism, i.e. metabolism. Among them are: disorders of self-regulation of the cell, leading to its energy deficit and to disruption of enzymatic processes in the cell; disruptions in the transport systems of trophism, causing hypoxia (oxygen deficiency, oxygen starvation); disorders of endocrine or nervous regulation of trophism. Endocrine regulation is normally associated with the functions of the endocrine glands, hormones that play an important role in ensuring the vital activity of the human body. Nervous regulation is mainly carried out by the mechanism of trophic nerves, which determine the use by the organ of nutrients deliv-

ered by the blood. It is metabolic dysregulation that is observed in degenerative diseases. In case of fatty liver disease, for example, 50% of the cells of the hepatic lobes (hepatocytes) contain predominantly neutral fat. Fatty liver disease can develop in conditions characterized by a high level of fatty acids in the blood plasma (alcoholism, diabetes mellitus, general obesity, hormonal disorders), when toxic substances (such as ethanol, carbon tetrachloride, phosphorus, chloroformide) are exposed to hepatocytes disturbed nutrition and in connection with a lack of protein in food or diseases of the gastrointestinal tract.

The interaction of internal and external factors in the life of an organism in the philosophy of medicine in the context of a systematic approach involves the interaction: 1) between the organism and the external environment, man, on the one hand, and nature, on the other; 2) between individuals as biosocial beings and as integral autonomous organisms, 3) between anatomical organs within the organism; 4) between cooperatives of cells within organs; 5) between cells and their intracellular formations (organelles), etc. This distinction is important for the simple reason that cells, while maintaining their autonomy, at the same time cooperate in metaplasmic formations and colloids and serve not only self-preservation, but mainly self-preservation and functioning of anatomical organs and the whole organism as a whole. None of the specified elements of the human biosocial system, both in normal and in pathology, can realize its life functions outside of interconnection, interaction with each other, starting with the body and nature and going deeper into the elementary self-regulating living system — a cell with its intracellular formations ... Interaction as an extremely general category of philosophy, along with matter and motion, is concretely manifested in the most complex microbiological, anatomical-physiological, neuropsychological processes.

This regularity, both in norm and in pathology, acts in the blood circulation; with resuscitation and intensive care; in inflammatory processes; immunopathology; with sclerosis; in adaptive and compensatory processes; with tumor growth, etc.

As you know, blood circulation ensures the exchange of substances between the body and the external environment. With the help of blood, the cells of the body are supplied with oxygen, nutrients, water and the removal of carbon dioxide and other end products of metabolism; thermoregulation in the body is carried out. Thanks to the blood, hormones, antibodies and other physiologically active substances are transferred, as a result of which the body functions as an integral system.

Additional data on the basic properties of human life and health and medical methods of their protection, restoration and protection, considered in the context of determinations in general human pathology, are provided by a relatively new branch of clinical and theoretical medicine — resuscitation and intensive therapy. Resuscitation and resuscitation aim to revitalize the body, develop methods for preventing clinical death, and treat acute types of terminal conditions: acute heart failure, shock reactions, coma. The working classification of complications of resuscitation and intensive care, drawn up taking into account the etiological and anatomical signs, distinguishes three groups of complications and syndromes: traumatic, non-traumatic and diseases of the revitalized organism. Traumatic complications include injuries during open and closed heart massage; trauma during puncture of the heart and catheterization of large veins; complications of pulmonary resuscitation: tracheal intubation (introduction of a special tube into the trachea or bronchi to ensure airway patency), artificial ventilation. Non-traumatic complications of resuscitation include various pathologies: acute expansion of the heart, air embolism, thrombosis, detoxification of the body (gastric lavage, hemodialysis using the "artificial kidney" apparatus, artificial circulation, etc.); hepatic-renal, cardiopulmonary and other syndromes of diseases of a revitalized organism. The complications of resuscitation and intensive care must be treated with high professional and moral responsibility. For example, being one of the technical achievements of resuscitation, artificial lung ventilation (ALV) requires strict indications for use, as well as constant monitoring of the blood gas composition for the correct selection of the main parameters of hardware ventilation: ventilation volume, synchronization of spon-

taneous breathing with the apparatus, and the quality of the breathing mixture. Acute asphyxia and cardiac arrest due to technical malfunction of ventilators is a reality in the absence of constant monitoring of patients.

Inflammation has general pathological signs. It is a complex, complex local reaction of the body to tissue damage by various pathogenic stimuli. In the pathogenesis of inflammation, we find the interaction of internal and external factors that cause it. A striking example of this is infectious diseases. External factors or aggressive irritants include microorganisms (viruses, bacteria, fungi), animal organisms (protozoa, helminths, insects), toxins, chemicals (acids, alkalis), mechanical irritants (foreign bodies, pressure, friction), thermal irritants, drugs, ionizing radiation. Internal autogenous (arising within the body itself) factors causing inflammation include products of nitrogen metabolism, decay products of tumors, mediators (mediators), immune complexes, etc.

Modern immunology studies the protective properties of the body, the general biological foundations of immunity, the laws that ensure the body's immunity to infectious and non-infectious agents and substances with antigenic properties. V.V. Serov believes that among the questions of immunopathology, hypersensitivity reactions, autoimmune diseases and immunodeficiency syndromes attract the greatest attention. In the clinic, there is a connection between the hypersensitivity reaction and chronic inflammation. The latter can be a manifestation of immune chronic inflammation (hypersensitivity) or the initiator of this reaction (chronic inflammation with an immune component). In the clinic, in the overwhelming majority of cases of chronic inflammation, it is possible to find the mutual influence of all types of immunopathology, including allergic factors. Characteristic in this respect can be observed in the course of chronic suppurative otitis media and in its treatment.

Philosophical principles of the evolution of life on Earth, determination of heredity and variability, reversibility and irreversibility in development are necessary in the study of any human pathology. The problem of congenital malformations also remains relevant. G.I. Lazyuk notes that in the classification of the causes of malformations in humans, the attention of theoretical and clinical pa-

thology is paid to changes in hereditary structures, the interaction of endogenous and exogenous factors. A number of diseases can be based on mutations, metabolic disorders, radiation, etc.

The human body, his health constantly gravitate towards self-preservation, normal functioning, stability of all internal structures, to a state that is called homeostasis in medicine. However, the body has to experience a tremendous impact of various natural and social factors. A person's life can be full of blood only in the unity of his inner and outer world. In the course of long evolution, the human body has developed a system of adaptive and compensatory mechanisms based on reactive determination. Modern general human pathology has expanded the range of studying this problem at the levels of both external impact on the body and internal anatomical and physiological, intracellular molecular biological processes. D.S. Sarkisov, V.P. Tumanov, one of the most important achievements in this area of knowledge is the elucidation of the patterns of DNA repair, physiological and reparative regeneration. "When the synthesis of substances is disturbed or suppressed and their decay begins to prevail, we are talking about dystrophic and necrotic changes in tissues, when in response to this synthetic processes are sharply activated and the function is restored, — about reparative regeneration ..." The dialectical unity of the two and the synthesis of opposite principles of the life process — the continuous disintegration of substances in the body, dissimilation and assimilation, functional tension and rest — are considered as a specific feature of life processes. The material carriers of adaptive and compensatory reactions are cells, their nuclei, cytoplasmic structures, proteins, nucleic acids, enzymes and other ultrastructures in the body, which are formed "according to the level of functional tension required from the organ."

The founders of synergetics extend the principles of nonlinearity, randomness, as well as unambiguous determinism to the entire society, to its evolution. The following ideas of E.N. Knyazeva and S.P. Kurdyumov can be important for philosophical reflections on the features of determinations in general human pathology. “Dynamism (or unambiguous determinism,” they write, “sta-

tisticality (or, in the language of synergetics,“ stochasticity, randomness) ”is a characteristic of two different levels of development and self-organization of system objects: the level of the system as an integrity and the level of its elemental structure Dynamism is a fundamental quality of the development of the system as a whole, because it is associated with the unidirectionality, unambiguous determinism of the development of open nonequilibrium systems, between bifurcation points, points of choice of evolutionary paths. elemental structure "The unambiguous determinism of the functioning of an organism with its health can most likely be attributed to the evolution of the genus in phylogeny, and" randomness " to the development of an individual's organism in ontogenesis. These features of the interaction of ontogeny and phylogeny in the study of health factors can also be attributed to mutual the action of individual and public health, taking into account the fact that in phylogeny we are dealing with the human race in general in its evolution, and in public health — with the population of a given country, people, nation, a given society. In the development of a given society, the process of its evolution does not stop.

1.5. SELF-TEST QUESTIONS AND EXERCISES

1. Define the concept of "health" from medical, socio-philosophical, psychological and sociological positions?
2. What is disease as one of the most significant concepts in the sociology of medicine?
3. What is the difference between a pathological process and a disease?
4. Present schematically the levels of health and its indicators.
5. What does the expression "health potential" include?
6. What is the essence of the concept of "pathological condition"?
7. What are the conditions that promote and prevent the occurrence of the disease?

CHAPTER II. THE PRINCIPLE OF BIOSOCIALITY IN THE GENETICS OF INDIVIDUAL AND PUBLIC HEALTH OF A PERSON

Questions to consider:

1. General genetics — the source of human genetics.
2. "Barrier of sociality" in the genetic evolution of anthropogenesis and human health.
3. "Genetic burden of humanity" and giftedness.
4. Relativity of internal and external in the structure of human health in the context of evolutionary ecology.

Basic concepts: human health, human genetics, "genetic burden of humanity", gifted evolutionary ecology.

2.1. GENERAL GENETICS — THE SOURCE OF HUMAN GENETICS

Since ancient times, people have known that children inherit their inherent characteristics and abilities, including health, from their parents. They noticed this property of the living not only in humans, but also in plants and animals. The experience of breeding and improving varieties of plants and animal breeds subsequently gave rise to the science of selection. The knowledge that a healthy organism is formed from a healthy seed has become entrenched in the historical consciousness of people. Philosophers and doctors of ancient Greece, Rome and the East knew about diseases that can be inherited.

The English historian and anthropologist Louis Morgan and after him Friedrich Engels substantiated the conclusion that the modern monogamous family in human society arose as a result of a long evolution through the prohibition of marriage, first between parents and their children, then between brothers and sisters. Later, a ban was imposed on marriages of cousins and even sec-

ond cousins, nephews with their aunts, nieces with their uncles among themselves.

Long before the laws of heredity were discovered, men and women began to strictly approach the choice of partners for marriage and the production of children, they tried to choose them from distant clans and settlements. Today, in the conditions of post-industrial civilization, marriage unions are created between representatives of different tribes, peoples and countries. Children born from such marriages are more resilient and more resistant to disease. This question does not confirm the polygenic belief system, according to which the differences between races are so great that they are supposedly different biological species.

Even before the advent of scientific experiments in biology, the idea of fused heredity was circulating, the material of which seemed to be something like a liquid, like blood. L.A. Atramentova and O.V. Filiptsov wrote that “hence the term“ purebred ”,“ half-blooded ”. “It was believed that, passing from parents to offspring, the hereditary substance manifests the property of liquids: when crossing, it mixes in any proportions and, after mixing, cannot further divide into the original“ pure variants ”... However, this idea“ could not explain some facts. For example, sometimes purebred animals gave birth to descendants with unusual characteristics, for example, a short-legged lamb or a tailless kitten ... later these animals were called mutants. Mutant traits have been steadily inherited over many generations ... Examples of stable inheritance of rare traits are known in humans as well”

We would add our own to the comments of the named authors. Yes, the "idea of merged heredity" could not explain the cited and some other facts of the transmission of heredity from parents to descendants. At the same time, the idea of the presence of a connection between a hereditary substance and blood, which prevailed and generally recognized, as the above authors indicate, until the middle of the 19th century, also contained a positive side: modern genetics legitimately substantiates the connection of heredity with the Rh factor of human

blood. The idea of "fused heredity" played another positive role in its time: it directed the search for heredity not in the spheres of mysticism and abstract reasoning of some religions about the "fate" of the human individual, but in the sphere of biological matter.

In 1809, French biologist Jean Baptiste Lamarck first formulated the principle of evolutionary changes in living organisms. His main idea was that "changes in the size or shape of the body of an animal, for example, as a result of a change in diet or dietary habits," that is, acquired traits "can be passed on to its descendants." 50 years after Lamarck, the English biologist Charles Darwin published his famous work "The Origin of Species by Natural Selection" in 1859. Its main idea is that a type of genetic change is caused by random gene mutations in the germ cells (eggs and sperm). These mutations (changes) in germ cells make their carriers more adapted to changing conditions of existence and more viable than less adapted ones, that is, they do not have useful mutations and therefore die in the struggle for existence. Charles Darwin called this process natural selection.

The theory of natural selection, created by Charles Darwin, and today occupies a dominant position in general biology, including biology and genetics of human health, with the only difference that social factors are added to biological factors in the genetics of human health. At different periods of a person's life, the interaction of biological and social factors in his body is carried out harmoniously or with impairments. Death is a default of vital energy in the body as a result of disruption or destruction of the coordination of the functioning of any vital organ (heart, lungs, liver, kidneys, etc.) with the functioning of other organs and the whole organism as a whole.

The origin of genetics as a science is associated with the name of Gregor Johann Mendel (1822–1884), a monk of the Augustinian (so-called "mendicant") monastery from the Austrian city of Brunne (Brno, modern Czech Republic). Crossing different varieties of peas and analyzing the frequency of the susceptibility of traits in the offspring (hybrids) obtained, Mendel in 1865 at the

scientific society of naturalists, then in a work published in the works of this society entitled "Experiments on plant hybrids" formulated the laws of inheritance of traits (laws of heredity) ... At first, Mendel selected plants that produced seeds of only one (mono) color and thus obtained clean lines. As a result of crossing (called monohybrid) plants with yellow seeds and green seeds, that is, two different clean lines, in the first generation, all descendants had yellow seeds. Mendel called this phenomenon of the predominance of a uniform trait of one of the parents domination, and the trait — dominant. They are designated by capital letters "A", "B", etc. The trait suppressed by the dominant and not manifested in the first generation hybrids was called recessive. It is designated by non-capital letters, respectively "a", "b", etc. This phenomenon entered the history of genetics as the first Mendel's law called "the law of uniformity of hybrids of the first generation", or "the law of dominance."

In addition to the cited first law of inheritance of the traits of crossing pea seeds, Mendel discovered two more laws. Some prior knowledge is required to understand them. Mendel in his experiments used the so-called hybridological method, when two pure lines of seeds are crossed to obtain descendants (hybrids) of the first generation, which are then crossed with each other. The results of the inheritance of traits are analyzed quantitatively from each parental pair in each generation. Mendel's second law comes from the experience of crossing the first generation of pea seeds. As a result, some of the offspring turned out to be green in a ratio of three yellow to one green (3: 1). This fact was explained as the "law of splitting" (divergence of signs). It turned out that in accordance with Mendel's second law (the law of splitting), all the characteristics of the resulting individual are represented by a pair of hereditary units, which Mendel called "inclinations", later (at the suggestion of the Danish biologist V. Johansen in 1909) called "gene".

Looking ahead in order to make Mendel's discoveries more understandable at this stage in the study of the history of genetics, we note that genes, as further studies have shown after Mendel, turned out to be elements of a more com-

plex biological structure — chromosomes located in the cell nucleus and being carriers of genes and determining hereditary properties of cells and organisms.

The laws of inheritance of traits discovered by Mendel served as the starting material for the birth and further development of genetics as a science.

The philosophical content of Mendel's discoveries of the laws of inheritance of plant traits is primarily in the discovery of the fact of the existence of carriers of heredity — genes ("inclinations"), transmitted from parents to descendants. The gene thus receives the status of “being”, the objective property of beingness (existence) in the form of a material substrate.

The second side of the philosophical content in Mendel's teachings lies in discreteness, that is, discontinuity, spatio-temporal delimitation of elements and states of heredity, which Mendel called inclinations, or "factors".

The property of discontinuity (discreteness) in the philosophy of biology is necessary, objectively related to the property of continuity of an object and its states. Continuity here is interrelation, interdependence of elements and states of a biological organism, its unity. This unity in biological matter is ensured by its consistency, regardless of whether the system is simple or complex.

Tracing the history of genetics, it is inappropriate to divorce it from the history of other sciences. Genetics, starting from its first steps, developed primarily within the framework of general biological laws, based on the laws of the origin and development of cell biology. In the present conditions on Earth, the formation of new cells is possible only by dividing existing ones. Cell division is necessarily preceded by a doubling of cellular structures containing genetic information. In this regard, it is appropriate to note the first steps in the creation of a cell theory.

The first cell was observed by the English physicist Robert Hooke (1635–1703). With the help of a microscope improved by him in 1665, he examined cork slices, the core of an elderberry, and reeds and discovered the presence of "cells" or cells in them. Soon Hooke's discovery was confirmed by the English botanist Nehemiah Gru (1641–1712), who described the microstructure of the

root, stem, leaves and some types of cells (1682), and the Italian biologist and physician Marcello Malpighi (1628–1694), the founder of the microscopic anatomy of a number of plant tissues and organs , animals and humans and opened capillary circulation.

In 1680, the Dutch (Dutch) optician Anthony Van Leeuwenhoek (2) manufactured lenses with a magnification of up to 300 times. For the first time he observed and sketched (1673) a number of protozoa, spermatozoa, bacteria, red blood cells and their movement in the capillaries. Improvements in microscopes and microscopy techniques have expanded knowledge of the cell. In the 19th century, the protoplasm of the cell (Purkinje J., 1830) and the nucleus (Brown R., 1838) were discovered. In 1838–1839. German scientists botanist Matthias Jakob Schleiden and zoologist Theodor Schwann formulated the cellular theory, according to which the cells of plant and animal organisms are fundamentally similar and cells are the structural and functional unit of all living organisms. Today, the cellular theory is considered one of the largest generalizations of the 19th century and, in terms of its significance, is equated with the discovery of the law of conservation of energy and the creation of Darwin's evolutionary theory.

The doctrine of the cell at that time allowed the German physician Rudolf Virchow (1821–1902) to put forward the problem of the health of the body and substantiate the theory of cellular pathology, according to which the pathological process is the sum of disorders in the vital functions of individual cells. For example, a serious illness, diabetes mellitus, is caused by the fact that a certain part of the pancreas loses its ability to synthesize the hormone insulin.

Russian scientist Karl Ber showed that the development of all multicellular organisms begins with one cell (egg).

Within the framework of the cell theory, genetics is further developed. In the 80s of the 19th century, mitosis and meiosis were described — the division of somatic and germ cells, respectively, during which nuclear structures —

chromosomes — are naturally distributed between daughter cells (V. Voldeyer, 1888).

Data on the nature of the distribution of chromosomes in the process of cell division allowed the German cytologist and embryologist Theodor Bovary and W. Setton at the beginning of the twentieth century to conclude that the continuity of properties in a number of generations of cells and organisms is determined by the continuity of their chromosomes. Chromosomes began to be considered as material carriers of the hereditary program.

Outstanding biologists were engaged in gene theory. English biologist William Betson (1861–1926), a foreign corresponding member of the Russian Academy of Sciences (1923) explained the emergence of new traits in organisms by the loss of "inhibitory factors", proposed the term "genetics" (1907). Danish biologist Wilhelm Ludwig Johansen (1857–1927), a foreign corresponding member of the USSR Academy of Sciences (1924), created the doctrine of "clean lines", laid the foundations of modern breeding principles, introduced the terms "gene", "genotype", "phenotype". Dutch botanist Jan Paulus Loten (1867–1931), believed that species are constant, unchangeable, since genes are constant and unchangeable; put forward the concept of "Evolution by hybridization" (1916).

The most important stage in the history of genetics is associated with the chromosomal theory of heredity, which was substantiated by the American biologist Thomas Hunt Morgan (1866–1945), a foreign corresponding member of the Academy of Sciences (1923) and a foreign honorary member of the Academy of Sciences of the USSR (1932), President of the National Academy of Sciences of the USA (1927–1931)). He experimentally established the patterns of the location of genes in chromosomes, which contributed to the elucidation of the cytological (cellular) mechanisms of Mendel's laws and the development of the genetic foundations of the theory of natural selection, for which he received the Nobel Prize (1933).

The problem of gene structure was also studied in Russia. In 1919, a Russian biologist, geneticist, founder of the modern doctrine of the biological foundations of selection and the doctrine of the centers of origin of cultivated plants, Academician of the USSR Academy of Sciences (1929) N.I. Vavilov substantiated the doctrine of plant immunity, in 1920 he discovered the law of homologous series in the hereditary variability of organisms. N.I. Vavilov organized a botanical and agronomic expedition to the countries of the Mediterranean, North Africa, North and South America, established ancient centers of the formation of cultivated plants on their territories. He collected the world's largest collection of seeds of cultivated plants, laid the foundations for state variety testing of field crops. He initiated the creation of a number of research institutions in Russia. He courageously defended genetics in the fight against the "teaching" of T. D. Lysenko. He was a member of the leading state institutions of the All-Union Central Executive Committee, the Central Executive Committee of the USSR, President of the All-Union Geographical Society. N.I. Vavilov was unjustifiably repressed in 1940, died in a prison hospital.

We have listed here not only the scientific discoveries of the outstanding Russian scientist, but also his place in the political life of the country for the reason that in the 30s of the twentieth century in the USSR mass repressions were carried out against the best representatives of science, the intelligentsia, due, as is now known, the political regime in the country under the conditions of the personality cult of I.V. Stalin. Outstanding Russian biologists and geneticists N.P. Dubinin, N.K. Koltsov and their associates.

Already in the 1920s and 1930s, “the authority of Soviet genetics abroad was so significant that in 1937 an international genetic congress was planned to be held in Moscow. Major Western scientists have worked in our country, including the future Nobel Prize laureate G. Meller ”(1). Meller (Muller) Herman Joseph (1890–1967) — American geneticist, one of the founders of radiation genetics, was a foreign member of the USSR Academy of Sciences. He experi-

mentally proved the possibility of mutations under the influence of X-rays (1927). Participated in the development of the chromosome theory of heredity

Any branch of science, including genetics, develops as an inseparable part of the totality of sciences. Each of them has a history of its origin, formation and development. Each of them arises in its own time and is conditioned by the needs of the development of society, on the one hand, and the accumulation of scientific knowledge, on the other. In this sense, there is a law of uneven development. This law manifests itself in differentiation (division, dismemberment, stratification of the whole into parts, forms and stages) and integration (unification) of sciences.

Genetics as the science of heredity and variability of living organisms arose and develops in connection with the development of biological and medical sciences. At the same time, modern genetics is gaining increasing importance as a comprehensive methodological theory of human health.

The main directions of modern genetics began to develop especially actively in the last decade. In the late twentieth and early twenty-first centuries, the works of N.P. Dubinin, E.I. Kolchansky, A.P. Mozelova, R.S. Svetlova, Z.A. Zorina, II Poletaeva, Zh.I. Reznikova in general genetics and biology; works by E.K. Timolyanova, N.P. Bochkova, A.F. Zakharova, V.I. Ivanova, G.R. Mutovina, S.I. Kozlova, E.K. Khandozhina, R.G. Hare and others in medical genetics; E.M. Mastyukova, A.G. Moskovkina on the clinical and genetic foundations of correctional pedagogy and special psychology; L.A. Atramentova, O.V. Filiptsova on psychogenetics; works of foreign authors E. Steele, R. Lindl, R. Blenden and others on the problems of gene evolution, etc. Domestic scientists V.N. Yarygin, V.I.Vasiliev, I.N. Volkov, V.V. Sinelnikova created a book under the traditional name "Biology", but original in content, in which biological knowledge is the most important source of medical knowledge, including genetic knowledge, which gave the authors reason to say about the forthcoming "building of biomedicine". The textbook on anthropology, created by V.M.

Kharitonov, A.P. Ozhigova, E.Z.Godina, and others, is full of modern knowledge.

We will continue the socio-philosophical analysis of the biosocial nature of human health in the genetic aspect in the field of general genetics as a source of human genetics.

In the structure of human health, genetic factors play the role of its deep concretization. The historical facts of the search by science for the genetic properties of living beings, materials from the history of genetics, the work of domestic geneticists, biologists, and philosophers served as a source for considering genetic factors in the structure of human health in a socio-philosophical aspect.

The idea of the genetic relationship of all living forms on Earth, including humans, served as an impetus for socio-philosophical reflections on the genetic problems of human health that we have chosen. And the main task of this study is to try to substantiate the dual nature of human health — biological and social on the examples of general genetics, human genetics and medical genetics, to try to formulate modern socio-philosophical problems of genetic factors, that is, factors of heredity and variability in the structure of human health.

The structure of human health is multidimensional. The deepest is molecular genetic. A concrete-holistic multidimensional state of human and population health is conditioned (determined) by genetic information. The entire amount of biological (genetic) information, determined in a qualitative and quantitative respect, is recorded in a gene that constitutes an elementary unit of life at the molecular genetic level.

Genes are a segment of the DNA molecule — deoxyribonucleic acids and occupy a certain place in the structure of chromosomes. A person has 23 pairs of chromosomes. The latter (chromosomes), working in the hereditary structure of the human body, contain about or more than 3800 genes.

The basis of the vital activity of organisms, including humans, is the cellular and molecular genetic levels of life organization. The cell is the elementary

unit of life. The cell will be specially discussed below, but for now we will continue to study the genetic nature of a person in the context of interactions in the structure of human health on the principles of a concrete, holistic and dual, biological and social organization of a person.

In the history of genetics, there were fierce discussions on the question of the dual nature of man — biological and social — which testifies to the presence of two important aspects in it: the first is the inner content of genetics itself as a science studied by general genetics; the second aspect is the mechanism and degree of participation of general genetic laws and regularities in ensuring the properties of heredity and variability in humans as a biosocial being in ontogeny and phylogenesis.

General genetics reveals the properties and laws of heredity and variability inherent in all living organisms that existed and exist on Earth, and in human genetics, these general properties and laws function in the human body, which is qualitatively different in its complexity and multidimensionality due to human sociality.

Human sociality is manifested, first of all, in the universal superiority over animals of the reflective, programming and creative role of consciousness in comparison with the psyche of even the most developed animals in this respect, such as the gorilla and chimpanzee.

In modern philosophical and general biological literature, it is recognized that if the prehistory of human formation was carried out under the guiding action of natural selection, mutations, isolation and interbreeding, modern social evolution of man is carried out under the guiding action of culture and civilization.

The theory of evolution recognizes the conventionality of the border between living and non-living nature, between living nature and man. The cellular organization, physicochemical and genetic laws functioning in it, are inseparable from the existence of a person, as well as any other organism.

Evolutionary theory, which is included in the sphere of interests of philosophy and social philosophy, reveals the origins of biological, incl. genetic mechanisms of development and life of people, i.e. what is called their biological heritage.

According to one of the greatest geneticists of the 20th century N.P. Dubinin, as a result of the "greatest" leap, as he wrote, "in the history of life on our planet, the biological essence of an animal has been replaced by a social person." Anthropologists are already using the concept of "human biosocial essence".

This most important conclusion requires further careful philosophical reflection. In this regard, along with the concept of "social essence of man", we introduce a new concept "biosocial nature of man", which, in the context of the study of human health, opens the way to a more adequate disclosure of both the nature of man in order to understand the essence of health and the social essence of man, which we consider as an integral part of the more general concept of "human biosocial nature." By this we close the way for the substitution of two, although of the same order, but differing in content, concepts — "human nature" and "human essence".

The preliminary facts, scientific positions and reflections given above give reason to note that human life and health are associated not only with his own genetic factors, but also with the factors of heredity and variability of plants and animals, with the skillful and reasonable use of the laws of genetics.

Genetic factors in the structure of human health in the socio-philosophical aspect are complex and sustainable. This means that, acting within the framework of coevolution, that is, the evolutionary interaction of organisms of different species, at the same time they do not replace the human genotype, living organisms do not exchange genetic information, but are closely linked biologically. This side of the socio-philosophical problem of human health needs further, more specific study of the genetic factors of human health.

2.2. "BARRIER OF SOCIALITY" IN THE GENETIC EVOLUTION OF ANTHROPOGENESIS AND HUMAN HEALTH

Anthropogenesis is a long stage in the evolution of human ancestors (hominids), during which their genetic structure was formed, complicated, developed and reached the level of "Homo sapiens" (homo sapiens). This structure laid down the genetic program for the interaction of ontogeny and phylogeny for the subsequent evolution of man.

In genetics, the "Weismann barrier" is known, which is sometimes called the "citadel of genetics". Its essence lies in the recognition that the origin of species by natural selection proceeded only through the sex cells, but not somatic. Attempts to prove otherwise, i.e. the ability of somatic cells to transmit characteristics acquired in ontogeny to reproductive cells and thus to change heredity, faced with the "Weismann barrier". So far, science has failed to overcome this barrier. It is important to note that germ cells, in comparison with somatic ones, have a more complex structure and, one might say, belong to a higher level of the evolutionary development of organisms. In accordance with this logic of thinking, in the philosophical literature, we introduce the concept of a “social barrier” in the genetic evolution of anthropogenesis, which in our study we interpret as an obstacle on the long path of evolution of hominids, which could be overcome only by one, the only one of many, branch of these highly developed animals.

For billions of years, differentiation and specialization, adaptation (adaptation) of living beings to environmental conditions took place on Earth. Most living creatures, including monkeys, specialized so rigidly to the sources of air, water, food, temperature, to natural and climatic conditions, flora and fauna, that they were unable to change further. Hominids, except for one of the many groups of individuals, stopped before the "barrier of sociality", only one of these groups managed to overcome this barrier and thus enter the path of biosocial development. *The factors of accumulation of the ability to overcome the “social*

barrier" in the evolution of anthropogenesis could be: 1) the struggle for existence, survival; 2) extreme conditions in which the human ancestor (the most developed branch of the hominid species) found itself as a result of the struggle for existence; 3) specialization of the way of life and adaptation to these conditions; 4) universal physiological lability, mobility, plasticity of the genotype of this branch of hominids, in contrast to other branches; 5) the duration of the duration of evolutionary time.

Emphasizing the role of these extreme conditions, we believe that it is impossible for hominids to have to overcome extreme conditions only once. It is logical to assume that there were many of them, since we are talking about a factor in the long evolution of anthropogenesis.

According to a team of scientists led by Academician of the Russian Academy of Medical Sciences, Professor V.N. Yarygin, the skeletons of the human predecessor — australopithecus with a brain mass of 550 grams belong to hominids who lived 5 million years ago. He was mainly engaged in hunting for animals and their own kind, used the bones of large animals, sticks, stones as tools for obtaining food. "Skillful man" — one of the first representatives of the genus, found in East Africa, existed and date back 2 million years. His brain mass was 650 grams. "Ancient people" (paleoanthropes) with a brain mass of 1500 grams lived 200–400 thousand years ago. Modern man, called "reasonable", has existed for 40 thousand years. Consequently, an important factor in the evolution of anthropogenesis was the evolutionary time — a concept that we introduce into the categorical apparatus of the study of socio-philosophical problems of human health. The length of evolutionary time suggests a multiplicity of extreme conditions that hominids had to overcome and adapt to more and more new conditions of existence. Presumably, one of the groups of hominids was driven out by other animals so much that in unusual new conditions they found themselves without a natural, as it happened before, food and other life base — a means of subsistence. And their genetic structure, which was perfected over a long evolutionary time, prompted them to take a stick or stone from the sur-

rounding nature as a tool for obtaining food and protection from enemies. The factor of evolutionary time played a significant role in improving the genetic structure of animal ancestors of man and transforming them from a biological species into a social being. Labor activity with the help of tools made by himself has now become the main way of existence of a rational being — man. Evolutionary genetics, in accordance with Darwin's teachings, has accumulated evidence of the existence of natural selection in nature, and, therefore, the existence of a direct connection between natural selection in the change of genetic factors, which were important in the evolution of anthropogenesis, with the genetics of modern man and his health.

Since “the time of Darwin, it has been known that higher apes and humans have a number of common infectious diseases. Chimpanzees have been experimentally induced with syphilis, a disease thought to be exclusively human. I.I. Mechnikov managed to infect chimpanzees and gibbons with typhoid fever. Some features of protein metabolism common to hominids have also been discovered. "

The secrets of evolutionary genetics and its role in determining human health are more reliably than other branches of biology able to reveal, in our opinion, embryogenesis, which studies the laws of human development in the embryonic state, starting from the embryo. It is in the germplasm (proposed by A. Weisman in 1883–85) — the material substance of the nuclei of the germ cells — that the totality of the hereditary inclinations of the organism, its genetic program, is laid. Without a genetic program, there could be no corresponding program for overcoming the “social barrier” by human ancestors.

It is known that, unlike the genotype of all other living things, in the genotype of a newly born human infant, there is no barrier against social development. In the course of upbringing in a cultural (human) environment, he first learns to speak the human language, then, as an adult, to design and build houses, ships, airplanes from material objects, draw, compose music, etc., while animals, including chimpanzees , such a barrier is embedded, programmed in he-

reditary information. Chimpanzees, dogs are trainable, but they never speak in human language. The same is the parrot, which is only able to pronounce individual words in imitation of a person.

One of the mysteries of genetics, as we see it, is the problem of the jump-revolution from hominids to humans. In this extremely difficult problem, all research focuses on the role of labor, and the reason for the "leap-revolution" remains not fully understood.

Of course, there is not enough paleontological and other materials to judge with sufficient reliability about the time elapsed hundreds of millions of years ago. To all that vast material of both experimental and theoretical and methodological nature, we would pay attention to embryology — a science that studies the laws of embryonic individual development, or developmental biology.

The functional problems of embryology, or developmental biology, at the junction of it with cytology, genetics, physiology and molecular biology, are the ways of implementing genetic information in individual development, the molecular genetic basis for the differentiation of cells, tissues and organs, the mechanisms of cellular interactions and regulatory processes that ensure integrity developing organism, molecular mechanisms of normal and tumor growth, etc.

But for modern social philosophy, the answer to another question is important: how to explain that if the social nature and social essence of a person are capable of a newly born child, "devoid of consciousness" (more precisely, one could say "who has not yet formed consciousness"), to form in his consciousness, ideas, human traits, human abilities, then why education and culture will not be able to form a human consciousness in a newly born chimpanzee living in a human environment? Modern human genetics and modern social philosophy are called upon to give their judgments on this score. The author of this article believes that a newly born person is genetically endowed with the inclinations to become a person, to acquire consciousness, ideas, and human abilities.

In philosophical language, these inclinations are called an opportunity, which in a human child can turn into reality, provided that it is brought up in a cultural environment, and in animals (for example, chimpanzees), the psyche and the brain are genetically incapable of overcoming the bar of sociality, no matter how much they are brought up in a human cultural environment. environment. The ability of a human child to overcome this barrier, to take this height is already inherent in his genetic information during the long evolution of the prehuman. We have already called this ability the universal plasticity of its genome.

In the literature, they constantly and fairly refer to the role of labor in the process of turning a monkey into a human, but they do not discuss the issue of the sources of labor, that is, what is the cause of the emergence of labor. They do not pay attention to the seeming detail of F. Engels's remark that the most highly developed breed of monkeys, which later gave the ancestors of man, in the struggle for existence with other competing creatures was ousted from their usual habitat and thus found themselves in unusual, extreme conditions of survival. Why didn't she die? Because the universal plasticity of the genome of this monkey breed and the instinct for self-preservation, developed in the course of natural selection over millions of years of evolution, prompted it to start getting food not only by collecting ready-made products of nature, as it did before, like all living things, and with the help of tools, which she first found in the form of a sharp piece of stone, a stick that had broken off from a tree, etc., and then she was forced to make them specially. If the human ancestor did not find himself in an extreme situation in the struggle for existence and was not ousted from the relatively abundant natural habitat as a food source and if it did not possess the universal plasticity of the genotype, then he would continue to remain within the framework of the organization of animals.

From the examples of the evolution of hominids and anthroposociogenesis, we can say that the inheritance of hand flexibility acquired as a result of specialization is a biosocial inheritance. The social in man functions and develops together with his biological heritage. The same can be said about human health.

Social philosophy cannot and should not rush from one extreme to another: recognizing the biological heritage of man, immediately begin to push it aside by reference to the social essence of man. Nature acted wiser, it provides a reasonable combination of biological and social in man. And the scientific character of social philosophy lies in the recognition of the objective laws of this combination and interaction.

2.3. "THE GENETIC BURDEN OF HUMANITY" AND GIFTEDNESS,

Acquaintance with human genetics convincingly confirms our definition. To know exactly the state of health of a given individual, the words "sick" or "healthy" are not enough. Each of these words (concepts) requires concretization: what a person is sick with, that is, which organ is sick — heart, lungs, liver, etc. An even more specific question will be: what structural disorders have arisen in the specified organ, or, from a clinical point of view, what specific disease is the organ involved in, what is the diagnosis made by the doctor?

Specification goes deeper when laboratory studies of the patient are carried out using chemicals, devices, for example, fluoroscopy of the lungs, electrocardiogram of the heart, check and analyze the composition of blood, urine, mucus, etc.

From all of the above about the principle of biosociality in the genetic structure of human health, it follows that the molecular-genetic level of research of the human body is the deepest, most concretized. When it is quite rightly said that "health is not only a physical, mental value for each of us, an invaluable wealth of a person, but it is a moral, ethical, humanistic value, this is a condition of happiness ...", then with the same reason we can say that health requires a specific knowledge of its vulnerability, inconsistency, multidimensionality, and not just recognition of its value.

A diseased organ or a small unit of its structural organization involves the whole organism in the fight against the disease. That is why the body and its

state of health should be approached from the standpoint of a specific, multidimensional, complex integrity. Now we know or surmise that the principle of his biosociality is added to the principle of a concrete-holistic approach to human health.

Both of these principles in the genetic structure of human health are associated with the so-called "genetic burden of humanity", that is, the body's susceptibility to hereditary diseases. In the "Brief Medical Encyclopedia" of 1989, the publication indicated that about three thousand hereditary diseases and syndromes are known, which determine a rather significant "genetic burden of mankind." According to modern data, about 5 thousand hereditary diseases have been registered. According to the World Health Organization, about 5–8% of children are born with hereditary diseases and congenital malformations.

Each of the hereditary diseases is determined by various reasons: a defect in one gene; violation of the interaction of several genes and environmental factors; a change in the amount of chromosome structure, etc.

The complexity of the interaction of alleles in the body is different. Al-lel from Greek means one of the possible structural states of a gene. Any change in the structure of a gene as a result of mutations or due to recombinations in the structure of heterozygotes (hetero — heterogeneity, zygote — a fertilized egg) for two mutant alleles leads to the emergence of new alleles of this gene. The number of alleles for each gene is practically innumerable. Such mobility, vitality in the sphere of the microcosm of the living determines its amazing ability to endless morphological combinations, adaptability to changing conditions of life.

In genetics, the phenomenon of multiple allelism is known for genes that control incompatibility systems (for example, the Rh factor in humans). This phenomenon acts as a selection factor that prevents the formation of zygotes (fertilization of the egg) and organisms of certain genotypes. It is associated with the structural states of genes (the order of nucleotides in the gene), in which any change in the structure of the gene as a result of mutation under the influence of the external environment or due to intragenic recombinations (redistribu-

tion of genetic material in the offspring) in heterozygotes (alternatives of alleles) for two mutant alleles leads to the emergence of new alleles of this gene. The presence of several alleles of each gene in a population provides a certain level of polymorphism (for example, the existence of four blood groups in humans), as well as combinative variability of organisms, which serves as the starting material for their evolutionary transformations.

In the context of human health problems, these genetic phenomena are important in that alleles of one gene can cause the existence of different forms of the same disease, for example, different alleles of a gene that controls the synthesis of a chain of amino acid residues of hemoglobin causes different forms of anemia. As a result of mutations of genes encoding the biosynthesis of polypeptide chains (polymers built from amino acid residues numbering from 6–10 to several tens and with a molecular weight below 6000) and the replacement of some amino acid residues with others, abnormal blood hemoglobins can be formed (in humans, about 300 of such forms of hemoglobin), which leads to the development of various blood diseases. From the examples given, we are once again convinced of the multidimensionality and inconsistency of the genetic structure of not only healthy people, but also carriers of hereditary defects.

In genetics, the phenomenon of "reverse transcription" is known, in which there is a high level of errors during the formation of RNA from the DNA template (linear transcription) and during the formation of DNA from the RNA template (reverse, nonlinear transcription). The phenomenon of reverse transcription by the transcriptase enzyme, that is, the transfer of genetic information from DNA to RNA, was discovered by the American virologist Howard (Howard) Martin Temin (who received the Nobel Prize (1979), together with D. Baltimore and R. Dulbecco).

Both of these types of transcription are characterized by the frequency of point mutations, i.e. replacing one of the bases that make up DNA. This refers to adenine (A), thymine (T), guanine (G), cytosine (C). Errors occur, for example, when uracil (Y) stands up instead of (T), this frequency is approximately 10 mi-

nus the third power to 10 minus the fourth power, which is significantly higher than the replication error rate, i.e. when synthesizing a DNA copy complementary to the DNA sequence. These features of the transcription of genetic information are directly related to human health.

As established by Australian scientists E. Steele, R. Lindley, R. Blanden, inaccuracy, a large number of errors occur during the replication of the genome of RNA-containing viruses, for example, the influenza virus. This explains the rapid genetic change in the virus leading to an influenza pandemic.

An influenza pandemic is a local population, a small, relatively isolated from other similar, intraspecific group, which is characterized by an increased degree of panmixia compared to the population (mixin is from the class of mixotrophic protozoa, capable of combining various types of metabolism). This type of influenza is most likely a special form of intraspecific differentiation and specialization. This feature of influenza modifications explains the ability of influenza viruses to quickly and unhindered diffusion (spread) from individuals to the mass of the population and to influence the state of public health.

The aforementioned scientists E. Steele and his colleagues note that in the life cycle of the AIDS virus (HIV), inaccurate processes of copying RNA into DNA (at the stage of integration) and DNA into RNA (at the stage of expression during the infectious cycle) alternate. This virus also has a high mutation rate. Thus, all copying processes, including single-stranded RNA intermediaries (the transformation of RNA into DNA and vice versa), proceed with a large number of errors, while the repair of the sequence (restoration of the natural structure of DNA damaged during normal biosynthesis) is impossible, since the enzymes that determine such an inaccurate copying polynucleotides (RNA polymerase, reverse transcriptase and RNA replicase) did not appear to have error checking and correction functions.

In genetics, genetic control of development in animals and humans is known in the process of organogenesis during the period when the effect of mutations is manifested to a greater extent. The development of each organ, and

even more so of the organ system, is controlled by the coordinated action of hundreds of genes. However, with an excessive amount of mutations, genetic control is harmful to health. In humans, more than 120 forms of hereditary deafness are known, which arise as a result of the expression of mutant genes responsible for the formation of the auditory analyzer. The importance of the genetic factor in the development of deaf-dumbness is evidenced by the fact that deaf children from birth deaf children are born more often than hearing. In humans, about 250 hereditary eye lesions, about 150 hereditary skeletal anomalies, at least 18 genes responsible for normal sex differentiation have also been described. The importance of genetic control of ontogenesis is indicated by numerous diseases associated with genomic and chromogenic mutations.

In general, the genetic control of ontogenesis is obvious, however, in the process of development, the embryo and its parts have the ability for self-development, regulated by the most integral developing system and the zygote not programmed in the genotype.

In the classification of hereditary diseases, chromosomal, genetic, as well as diseases with a hereditary disposition, diseases of genetic incompatibility of the mother and the fetus, and diseases resulting from mutations in somatic cells are distinguished.

Among the chromosomal diseases, diseases associated with quantitative and structural chromosome abnormalities are distinguished; clinical syndromes with sex chromosome abnormalities.

Approximately 35% of chromosomal syndromes are caused by abnormalities affecting the sex chromosomes. They are inherent in both the X chromosome (female) and the Y chromosome (male). Monosomy on the X chromosome occurs only in girls, for example, Shereshevsky-Turner syndrome, marked by sexual infantilism, underdevelopment of internal and external genital organs. In newborns, there may be a characteristic pterygoid fold on the neck, multiple small developmental anomalies, lymphatic edema of the hands and feet occurs

in 50% of cases. Shereshevsky-Turner syndrome is often the cause of spontaneous abortion.

For socio-philosophical reflections, both morphophysiological determinants in the formation of sex in humans and socio-psychological ones are important. On the basis of genetic information at 11 – X11 weeks of embryogenesis, the gonadal sex of the unborn child develops - the ovaries and testes, respectively. During puberty, the gonads begin to secrete female (estrogens) or male (androgens) sex hormones, and the hormonal sex is formed and the corresponding female (eggs) or male (sperm) gametes — the gamete sex. At the same time, the morphological sex is determined — female or male phenotype. These are all physiological determinants of sex that are common to humans and most animals.

With mutational determinations among monogenic diseases, in which only one organ is affected, a significant place is occupied by the so-called enzymopathies associated with metabolic disorders — amino acids, carbohydrates, lipids, hormones, etc. inside the body.

Diseases with a hereditary predisposition are more common, the development of which depends on the joint influence of heredity and environmental factors. The interaction of internal and external in the human body is a general pattern of its functioning. The results of interaction in health depend on the specific characteristics of internal and external factors.

Along with the heavy "genetic burden of humanity" there is giftedness as a phenomenon opposite to congenital hereditary diseases and human vices. Giftedness and "genetic load" are two opposites of one and the same humanity, man as a rational being, qualitatively different from the most developed animals. The gifted are both representatives of the individual and the public of a person. Their giftedness in its genesis comes from the genotype that the parents give the child. At the same time, they are born as a result of long-term interactions of genotypes of many generations in the family tree of the genus. In this respect, they belong to a given ethnos, people, nation.

The giftedness of children has been known since ancient times. The leaders of clans and tribes were naturally promoted from among the physically healthy, strong and dexterous members of the primitive community. At the same time, they had to and really became the leaders thanks to their mental abilities.

In natural language, giftedness is defined by the word talent. But talent, in turn, by S.I. Ozhegov, for example, is interpreted as "outstanding innate qualities, special natural data", and actors and musicians are named as examples. Close to giftedness and talent is the concept of "genius", which, for the same SI Ozhegov, is considered an outstanding creative ability. At the same time, the "literary genius" L.N. Tolstoy, the genius of M.V. Lomonosov. In ancient Greek mythology, geniuses were considered "titans", possessors of fortitude, who acted as patrons of good or evil. So, the noble titan Prometheus gave people fire, for which, by order of the god of thunder Zeus, he was “chained to one of the rocks of the Caucasus. And he pecked at Prometheus "an eagle's liver, but his heart was unshakable." For our research, other secrets of the ancient Greek myth of Zeus and Prometheus are also important as initial ideas about the problem of giftedness. The myth tells that Prometheus loved people, "and showed them," still unintelligent, how to build dwellings, taught them to count and write, "to prepare medicines, to make healing ointments from which diseases passed." For his kindness and people he loved Prometheus. And Zeus envied Prometheus and was angry with him, but not only for the fire to people, but also because only Prometheus knew that "Zeus may have a son who will be stronger than his father, deprive him of his power over the world and overthrow him from Olympus."

In fiction, the image of the genius of evil is known — a demon. In his poem "The Demon," the Russian poet M. Yu. Lermontov in vivid pictures tells that his hero, having received immortality from the gods and satiated with it, flying over a sinful land, did evil — and evil bored him. Descending to the ground and admiring the beauty of the mountains and green valleys of the Caucasus, I suddenly heard the inviting voice of a woman who was singing. Although he fell in

love with her and she responded with love, the very first and only kiss was fatal for the woman. This is the philosophical conclusion of the poem: the love of a genius of evil and an earthly innocent woman are incompatible. Approximately the same idea is laid in the little tragedy of Alexander Pushkin "Mozart and Salieri"; only here it is not a heavenly demon, but a completely earthly talented composer Salieri, a friend of the genius Mozart, out of envy, poisons his friend, the composer Mozart. The philosophical conclusion is the same: "genius and villainy are two incompatible things."

Socio-philosophical scientific interest is the ratio of giftedness and genius. Considering this topic in a psychological aspect, A.I. Savenkov reflects in the following way. "The concept of" giftedness, "he writes," only denotes the potential of a person. " The point is that the potential for giftedness can remain in the shadow of popular life if there is no demand for gifted people in society. The images of Onegin, Pechorin and other very gifted people in Russian society are known, but they were not in demand by the time and the socio-political regime and turned out to be “superfluous people” in society, wasting their vital energy on boring everyday life.

Genius is the highest degree of giftedness that manifests itself in social conditions and areas where they could apply their genius abilities. This also raises the question of the genetic sources of genius. Genius is the result of long-term genealogical sexual interactions in the genealogy, as a result of which the children adopted from their parents only the high genetic abilities of the pedigree according to the laws of probabilistic determination, and in the genius of this individual they embodied everything accumulated by past generations only a hereditary program that is positive in terms of giftedness. Genius children are not born or rarely give birth to genius children, since the accumulated energy of genius of past generations is exhausted in this genius. Apparently, there is a limit to the accumulation of the genetic energy of genius.

Comparing the given concepts of "gifted", "talented", "brilliant", as well as the terms "titans", "heroes", "wise men", "wise men", which were used in an-

cient mythology, in the natural languages of peoples, in fiction, and also in genetics, psychology, pedagogy and other social sciences and humanities, it can be noted that despite the differences in their characteristics from each other, they have a common, primary — this is the concept of "giftedness."

The problem of giftedness has begun to be comprehensively studied, especially recently. Babaeva Yu.D., Voiskunsky A.E., Bodalev A.A., Rudkevich L.A., Leites N.S., Matyushkin, A.M., Polynin V., Savenkov A.I., Sternberg published their works R., Kholodnaya M.A., Efroimson V.P., Yurkevich V.S. and others (See literature at the end of our work). The leading place in research is occupied by teachers. Studying the characteristics of a gifted child at home and at school, A.I. Savenkov believes that it is customary to call someone gifted, whose gift as the ability to create "clearly surpasses some average capabilities, the ability of the majority." The quoted author rightly notes that nature endows each child with intellectual and creative potential, but unevenly. Someone she "rewards generously, not stingy, and someone bypasses." To this we would add that, in terms of physical and mental health, the concepts of "intellectual and creative potential" and "giftedness", although they differ, since they reflect very different levels of real, living children, however, they cannot be included in the category of children with congenital severe defects, diseases, not able not only to think creatively, but even to serve themselves in everyday life. The latter, i.e. children with severe disabilities, whose lives are surprisingly uneven in length, usually see nothing but the peculiarities of specialized medical institutions and neuropsychiatric dispensaries. This very significant, as it seems to us, remark applies primarily to those who, not understanding the subject of their reflections on the giftedness of children, persist in the fact that all children are born with the same abilities. The psychological side of this scientifically unfounded persistence, it seems to us, lies in the fact that people who adhere to such ideas about the equality or inequality of the innate abilities of children, firstly, are far from science, they do not know the data of psychology, psychiatry, medicine and genetics; secondly, their beliefs are formed on the basis of a completely innocent

desire to be gifted to their own children. Which parent wants their own children to be deprived of intellectual and creative giftedness? There are other social groups that deny or do not recognize the unevenness in the intellectual development of children for various reasons. Among these reasons in modern conditions is the preservation among some parents and teachers of the prevailing ideology in Russia, which denied the existence of an intellectual difference between children under socialism.

As for completely normal children who are able to become workers who are useful to the Motherland and their families, then, as historical experience confirms, their indicators of giftedness are consistently repeated from generation to generation in relative accordance with the data of the American psychologist David Veksler, who surveyed 1.7 thousand people for the degree of intellectual giftedness. According to him, a very high intelligence is found in 2.2% of all surveyed, high intelligence — 6.7, good norm — 16.1, average level — 50.0, reduced norm — 16.1, borderline norm — 6.7, mental defect — 2.2%.

We investigate the problem of "giftedness" in the socio-philosophical aspect, relying on the data of human genetics. In clinical practice and according to the results of genetic studies, more than 4500 genetic and about 1000 chromosomal diseases are currently known. Nature does not really ask the consent or disagreement of society on the issue of the intellectual and creative abilities of the birth of children. This raises the traditional question of what and how to do.

Back in 1869, the famous English scientist Francis Galton, under the influence of the works of his cousin Charles Darwin, put forward a proposal to scientifically study influences that could improve hereditary qualities (health, mental abilities, giftedness) of future generations. F. Galton formulated the principles of improving the hereditary health of a person in his work "Heredity of talent, its laws and consequences." His ideas were subsequently inspired with inspiration and contributed to the birth of eugenics — the doctrine of hereditary human health and ways to improve it. Like F. Galton himself, his progressive followers (American geneticist G. Meller, who worked in Russia in 1933–1937,

Russian geneticists N.K.Koltsov, Yu.A. Filipchenko, etc.), who relied on the achievements of genetics , the accumulated data on the inheritance of human traits, humane goals were set before eugenics.

However, her ideas were used in the propaganda of National Socialism and racism in Hitler's Germany, and eugenics was discredited. In modern science, many problems of eugenics, especially the fight against hereditary diseases, are solved within the framework of human genetics, especially medical genetics.

Answering the question of what to do and how to solve the problem of the giftedness of children, it is possible to answer only by relying on the achievements of modern genetics, medicine, biology, psychology, pedagogy, philosophy and other natural and social sciences and humanities. From the standpoint of social philosophy and genetics, the first, initial requirement is to take care of the health of a woman-mother giving birth to children. We are talking about the care of the woman herself about her health and, of course, the care of her on the part of the whole society and the state. This concern is multidimensional, voluminous, manifold, concrete and difficult. Everything is important here: the reproductive medical culture of future parents, and concern for maintaining love and friendship between spouses, and material, spiritual and psychological well-being in the family. Not a passion for alcoholic beverages, not an addiction to drugs and toxic substances, not a wild life, but moderation in the consumption of the benefits of civilization, as the sages advised in the past and advise in the present — these are the most important requirements for having healthy children. The main thing is not what degree of giftedness our children are endowed with by nature, but what their health is. It is healthy children that have the potential to grow up and become useful to the Motherland and family.

At the same time, in the conditions of a modern, industrial civilization, which is developing into a post-industrial and informational one, proper upbringing is of great importance in protecting the health of children. In this issue, the role of social philosophy is to provide the psychological and pedagogical

sciences with a reliable general scientific methodology, taking into account the fact that these sciences have their own, specific scientific methodology. The first requirement here from philosophy is to express its understanding of the goal of education, to indicate the values that should be introduced into the consciousness and activities of young people. From time immemorial, the prerogative in this matter has traditionally belonged to philosophy and religion. The difficulty of defining the goal and the corresponding content of upbringing and education is due to the difficulties, complexity, insufficient knowledge of the civilization, which includes Russia in the conditions of increasing globalization. In our time, it is not so easy to correctly orient children in preparing them for the choice of a profession, the business where they can realize themselves both as people, and as citizens of the state, and as children of already aging parents. There are thousands of difficulties and dangers in this matter. Modern civilization is a society of computers, televisions, cell phones, mobile phones, high-precision devices and devices for tracking people's lives, complex science-intensive technologies in material production, scientific, healthcare, and educational spheres. To find your place in this society, your niche in terms of abilities and needs, you need to have a higher and more accurate education in comparison with the education of past generations. A more patient psyche is required in order to withstand the increasing nervous tension in work, in everyday life. Hence the need for new programs and new technologies for teaching and upbringing children — children and highly gifted, and average. This is already the task of psychologists and educators.

As for the gifted, social philosophy, relying on modern general genetics, human genetics, psychogenetics, medical genetics, taking into account demographic data, proceeds from the fact that the peculiarities of the modern era more than never before need the protection of gifted children. Nature already supplies us with them sparingly. They are becoming less and less, primarily because of the incessant wars. At the same time, something more complex situation arises. The point is that in the modern information society, taking into account the

listed characteristics, there is a more fierce competition for a place of work, for the level of material support, for the possession of the benefits of civilization. The modern world community and together with it Russia are going through a transitional stage caused by new scientific and technological achievements. In Russia, protracted reforms have introduced such negative phenomena as corruption and terrorism into the way of life of people and society. In this situation, gifted people, less prone to violations of morality and law, faster than mediocre people who achieve success in their work, more often than others become victims of envy and terror.

If society wants progress, it must take care of gifted children, like everyone else, so that their creative potential is realized for the benefit of society.

2.4. RELATIVITY OF INTERNAL AND EXTERNAL IN THE STRUCTURE OF HUMAN HEALTH IN THE CONTEXT OF EVOLUTIONARY ECOLOGY

The concept of "health structure" is somewhat different from the concept of "body structure". An organism is its anatomy and physiology. The structure of health consists of thousands of physiological acts and reactions performed in the body in fractions of a second, second and minute, etc. its genes, chromosomes, cell molecules, cells, organs. An organism in its structure is constant for a period of time until destructive processes (catastrophe, accident or disease) damage it, and the structure of health is not only multidimensional, but also contradictory, unstable. Being a concrete integral state of the organism, health remains stable only relatively and dependent on normal or disturbed physiological acts.

The differences between internal and external in the health of the human body are opposite only relatively, and not absolutely. This relativity of their position is due to the fact that they are in constant, not stopping for a second, interaction as long as the body is alive.

In the socio-philosophical aspect of the study of health, the concept of "organism", as we said about it in the first chapter of this work, we use in a dynamic version, calling it "biosocial organization of a person" or simply "organism", depending on the context of thinking. Since we consider health as a certain state of the organism at each given stage of its life, the concepts of “health” and “organism” become of the same order, or identical. So, the relativity of internal and external in the structure of human health.

The interaction of an organism with the external environment is one of the fundamental laws of its life. In support of this, let us cite the first action of a newly born child.

Formed after fertilization, i.e. fusion of the male reproductive cell of the sperm with the female — the ovum of the zygote initially develops for some time as an integral part of the mother's body and does not yet possess a "self" (according to Hegel), however, under conditions of normal development, it reaches a state of selfhood, relative independence and begins to live this "her" life. In this state, the mother's body for a child still in the womb is both an internal and an external environment at the same time. A newly born child, having freed itself from the umbilical cord that binds it to the mother's body, will first of all inhale a breath of air to obtain oxygen from it.

Oxygen is the first substance necessary for human life that enters his body from the external natural environment. The human body cannot live without oxygen. He inhales air with the oxygen fraction contained in it every two to three seconds, making about 20 breaths and exhalations per minute, or 1200 per hour, about 28 thousand per day. The question arises, in which concept of the two — external or internal — is this air inhaled from the external environment into the lungs of a person every second into the internal structure of the body and its health? It is natural that air as an element of the external environment in the indicated process of the life of an organism every second becomes an integral element of its internal structure.

The complexity and multidimensionality of the problem under study lies in the fact that the relativity of the position of the internal and external in the body and, therefore, in human health is revealed, concretized not only in the interaction of the organism as an isolated system with the external nature and social environment surrounding it, but also in the interaction subsystems of the innermost structure of the body, that is, in the interaction between organs, between cells, between intracellular structures.

Hemoglobin, which ensures the transfer of oxygen inside the circulatory system from the respiratory system to the tissues and carbon dioxide from the tissues to the respiratory organs, itself in its internal structure has "internal" and "external" spheres and performs a vital function.

In the context of human health, the interaction of the internal and external spheres of the hemoglobin structure is of interest to us as an argument in confirming the definition of health as a specific integral characteristic of the state of the body with specific indicators of normal, "healthy" hemoglobin. The amount of hemoglobin in 100 ml of human blood is 13–16 g (in women it is slightly less than in men). 1 g of hemoglobin at the usual partial (ideal) pressure in the alveoli can bind up to 1.34 ml of oxygen. At rest, about 4 liters of blood per minute flows through the human heart, which ensures that the tissues receive about 200 ml of oxygen. With strenuous muscular work, the absorption of oxygen by the tissues increases by a factor of 10 or more. The rate of hemoglobin synthesis increases markedly with prolonged hypoxia (oxygen starvation of the body).

As a result of mutations of genes encoding the biosynthesis of polypeptide chains (polymers built of 6–10 amino acid residues that make up proteins. — Iv) and replacement of amino acid residues with others, abnormal hemoglobins can be formed (about 300 such forms of hemoglobins are known in humans), which leads to the development and disease of the body — hemoglobinopathy, including a severe, inherited disease — sickle cell anemia.

The examples given give us the basis for the following remarks. First, the internal and external in their interaction as one of the fundamental laws of the

organism's vital activity in relation to each other are complementary, and their autonomy is relative. Secondly, the specification of their interaction reveals the complexity, versatility and multidimensionality of the state of the organism and its health. Thirdly, the state of the body is contradictory, vulnerable, that is, it can be replaced by pathology (diseases) provided that the normal sequence of its structural formations is disrupted (in our example, amino acid residues). Fourthly, the human body as a biosocial system cannot live without substance, energy and information, the source of which is the external natural and social environment. Convincing evidence of the importance of the formulated provisions is given to us by the entire rich system of genetic, ecological, biochemical, biological, anatomical and physiological, medical and other health sciences and, as a generalizing position, the entire historical experience of a person's struggle to preserve health.

With the above preliminary remarks and provisions, we come close to the structure of the study of the problem of the interaction of internal and external in the biosocial organization of man, which the socio-philosophical aspect of the study obliges to consider in the broad context of evolutionary ecology.

Since human health in the selected aspect we define as a specific integral characteristic of the state of his biosocial organization, conditioned by the interaction of internal and external factors of vital activity and the corresponding structural-functional, material-energy and information processes at each given cultural-historical stage of the genetic, ecological, cultural historical and evolutionary development both in onto — and in phylogeny, then the study of the problem of internal and external in human health we will begin with a small excursion into the history of evolutionary theory, then we will more specifically consider the current problems of the impact of environmental factors on human health in the context of its evolution.

The difficulty of this task lies in the fact that the history of evolutionary theory is multifaceted, it includes many ideas, concepts that complement and clarify each other and or even contradict each other. Among the latter are the

synthetic theory of evolution (STE) and the concept of new genesis, alternative to classical Darwinism. A. N. Severtsov noted that “Various authors dealing with the issue of the causes of evolutionary changes adhere to two main points of view: the minority, with Negeli and Cohn, admit that these principles lie within the organism (the autogenetic principle), while the majority, together with Darwin, are looking for these principles outside the body in the environment.

In the cited quotation from A. N. Severtsov, one can clearly see the excessive emphasis by the authors of the indicated directions in the evolutionary theory of one of the factors of evolution: either the intraorganic structure of a living organism, or its environment, although A. N. Severtsov himself unfairly ascribes such one-sidedness to the supporters of Darwinism “instead of -ste "with its founder.

N. Ya. Meshcheryakova gives a rigid critical characteristic of the synthetic theory of evolution (STE) and new genesis. The essence of STE, as it shows, lies in the adherence of this theory to anti-Darwinism, refined reductionism; a one-sided approach to the problem, in the prevalence in the analysis of "abstract, universal, non-qualitative objects." For example, instead of a living organism as “the last link in typological ontology”, that being “which bears the features of the entire complex taxonomic hierarchy,” the supporters of STE take the category of “taxon”. There is no living organism in STE, just as there is, for example, no movement in the philosophy of Zeno and Parmenides. A weak point in STE is also considered that “the deterministic mechanisms of the formation of qualitative certainty in the evolutionary process of STE are found at a level that is not related to the level of this certainty. This is the level of formation of evolutionary material, and the adaptive value itself is determined here by a purely quantitative measure — the fertility of living organisms. "Without knowing the quality, STE knows only one form of adaptation — fertility, and selection itself for it is nothing more than differential reproduction."

It is hardly possible to reproach N.Ya. Meshcheryakova for excessively categorical judgments, because in her assessments of STE and nomogenesis, she relies on the main initial postulates of the authors of the analyzed concepts. In particular, attention is drawn to the opinion of K.H. Waddington, who adheres to the idea of the guiding role of the intra-organismal whole (nomogenesis) and, as a proof of this concept, proposed to introduce the concept of creod into biology, which means sustainable (canalized) development. “It is important to understand the nature of the mechanisms that determine the emergence of creod. that creode is simply the most general description of a so-called purposeful biological process, wrote C.H. Waddington. "The nature of such processes always constitutes one of the most important problems in theoretical biology." And what is the essence and source of a purposeful biological process? To this question, which arises spontaneously for any researcher, C.H. Waddington replies that the root problem is simply presented as one of the assumptions underlying algebra and logic, and receives no explanation.

Novogenesis is an evolutionary preformist concept of the internal, lawful programming of the historical development of living nature, put forward by L.S. Berg in 1922. The main postulate of new genesis is the recognition of the initial conditioning of the diversity of organic forms without the participation of the external environment. Rightly considering the evolution of living things to be a natural process, nevertheless, new genesis was unable to overcome the teleological orientation of its concept, and this causes criticism by modern methodologists in biology.

Each of the given evolutionary concepts, as you can see, reveals and emphasizes one or another side of the problem under study with a certain amount of truth, and in this sense, each of them in its aspect is justified. Their weaknesses are due to the specific historical level of development of science and are found today in the conditions of a higher development of the methodology of cognition. At the same time, more and more new attempts are revealed to rethink not only insufficiently studied aspects of evolutionary ideas, but also seemingly es-

tablished cornerstone concepts. In this regard, in the aspect of studying the problem of human health, attention is drawn to the work of well-known Australian scientists, who put forward a hypothesis that the evolution of the immune system of vertebrates could be carried out according to Lamarck, that is, by inheriting acquired characters.

So, we have before us the ideas of the authors of the book "What if Lamarck is right? Immunogenetics and Evolution" There is no need here to set out in detail the concept of the authors of the named work; philosophy is not a substitute for genetics. We are talking about a new look at classical Darwinism and neo-Lamarckism, directly related to the evolution of life on earth and the associated evolution of man, his biosocial nature, which determines the current and future state of human health.

We believe that Lamarck brilliantly noticed changes in living organisms, but as a result of acquired changes. But the founder of the evolutionary theory did not fully disclose the essence of the acquired changes and could not disclose, for then the genetic laws of changes were unknown. Darwin understood more deeply that these changes are not just somatic, not modification, but hereditary, caused by changes in the germ cells. Modern genetics suggests that it is the probabilistic nature of changes in hereditary (genetic) information, that is, the result of a collision during evolution of a random and necessary (natural) one that is the main factor of evolution.

A living human body cannot live without air every second absorbed from the surrounding external natural environment (without air a person can live no more than 5–6 minutes), as well as regular consumption of water and other material substances. In this regard, it is legitimate to say that the internal environment of a living organism and its external environment constitute a kind of unified system. And the relativity of internal and external factors in the life of the human body and, consequently, its health, is one of its fundamental laws.

2.5. SELF-TEST QUESTIONS AND EXERCISES

1. Describe the degree of scientific knowledge of the problem of social conditioning of health. What are the main areas of research you can highlight?

2. What are the main problems associated with the study of social health risk factors. What, in your opinion, is the reason for the existence of these problems?

3. Give a definition to the concept of "social determinants of health". Expand the essence of social determinism of human health.

4. What are social risk factors and anti-risk factors? How do direct and indirect social risk / anti-risk factors differ?

5. Name the main direct (primary) social health risk factors. What is their specificity?

6. What are the main indirect (contextual) social health risk factors? At what level of social existence do these factors manifest themselves to the greatest extent?

7. Explain the mechanism of influence of direct risk factors on health. Using one of the risk factors (smoking, alcohol abuse, irresponsible hygienic behavior, etc.) as an example, illustrate the mechanism of its influence on human health.

8. Build a model of the influence of social factors on an individual's health, choosing as an initial parameter one of the types of macrosocial contextual risk factors.

CHAPTER III. CULTURAL AND HISTORICAL FACTORS OF MODERN MAN'S HEALTH

Questions to consider:

1. Specific historical forms of public health activities.
2. Social spheres and institutions as factors of health.
3. Structural interactions in the economics of modern health care and pharmacy.
4. The problem of harmonization of health factors of modern man in the context of ecology.

Basic concepts: social spheres and institutions as factors of health, ecology, modern health care and pharmacy

3.1. SPECIFIC HISTORICAL FORMS OF PUBLIC HEALTH ACTIVITIES

Cultural and historical factors of health are factors of a given civilization. Historical experience shows that the higher the level of culture as a leading element of civilization, the level of historical development of society, the higher the level of welfare of society, the longer the life expectancy of people. Without going into the discussion of Malthusianism, which has been repeatedly subjected to quite sufficient and fair criticism, we will directly continue the already noted role of civilization as the most generalized, multidimensional, contradictory and integral factor of human health.

The concept of civilization includes not only the level of culture, but also its features, determined by the geographical environment, the continent where the given population lives, climate, division of labor, specific history, etc. Features of culture and civilization determine the degree of influence on human health of all specific social spheres and institutions. Of these, important for our research are the way of life, the sphere of work, its organization and culture,

forms of public consciousness, specific historical forms of organization of public health activities, economics of modern health care, pharmacology and pharmacy, human ecology.

In the problem formulated in this paragraph, its philosophical aspect arises from the most important feature of the development of society — the interaction of stable, constant in it and changeable, diverse. In the field of public health, the technologies in clinical practice and the forms of organization of medical care for the population are changeable and diverse. Technologies are periodically improved, changed, obsolete technologies are replaced by new ones as science and technology, including medicine, develop steadily. New forms of organization of clinical practice are due to the changing concrete historical conditions of social development.

Stable, constant refers to the phenomenon of human health, because it is health and care for it that is the eternal root cause, one might say, the substance of the variety of forms of healthcare organization. The interest of social philosophy in the substantial nature of health in relation to the specific historical features of health-protective activity arises due to the fact that in the historical process people get used to the existing forms and way of their life so much that, when the need arises for their renewal, they stubbornly resist new forms. This happens even when old forms turn into a brake on progress and new forms of organization of life become an urgent need. As an example in the field of healthcare, we can cite the recent experience of introducing insurance medicine in Russia. It has become a historical fact that for at least ten years in the minds of a significant part of the population, doubts continued to persist about the historical inevitability of new forms of health care. At the same time, the thinking part of the population of Russia does not give up hopes for a renewal of life, for example, it supports the need today to train and organize the work of general therapy doctors, as well as family doctors, to restore district hospitals in the countryside, to radically strengthen the material and technical base of rural hos-

pitals, which are already beginning to be implemented in the regions of the country.

Note that people have long known about the role of health as the basis for a full-blooded human life and susceptibility to diseases. Their everyday experience, which was based on collective and purposeful work, taught them over the centuries to find and improve ways to protect their health.

The authors of the textbook “History of the Bashkir ASSR” write that “burial mounds of ancient people of the Bronze Age have been excavated in many places in Bashkiria. Bronze axes, sickles, spearheads, knives were found under the mounds of the mounds. Believing in the afterlife, people supplied the dead with items that they used during their lifetime. "In the same manual it is noted that until the 12th century the Bashkirs were pagans and worshiped various forces of nature. Then Islam began to penetrate into Bashkiria through the Bulgar Khanate. The Bulgar preachers for years lived among the Bashkirs, spreading the Muslim religion, which helped the Bulgar nobility, as well as the top of the Bashkirs themselves, to keep the working people in obedience. "

In the above reports about the burials of ancient people on the territory of Bashkiria and the religious beliefs of the Bashkirs after the 12th century, the idea of a materialistic understanding of history is laid. From the standpoint of scientific medicine, it can be added that people of the Bronze Age and subsequent eras buried their dead relatives by burying them in the ground, not only out of religious belief in the afterlife. There is every reason to assert that the ancient people also buried the dead in the ground for health reasons, or, in modern language, for medical reasons. They knew from everyday experience that corpses left on the surface of the earth serve as a hotbed of infection and disease. The corpses of animals were also buried at some distance from human settlements. Muslim burial rites also followed the same rule, taking into account both traditional beliefs and medical requirements.

The public health nature of the burial of the deceased is also confirmed by the experience of other peoples who lived in the territory of Bashkortostan. For

example, among the Mari, who in ancient times adhered to pagan beliefs and never followed the Muslim religion, the dead were buried in the ground primarily out of the need not to turn them into a source of infection against those who remained alive. It was not the religious idea of an afterlife that demanded the burial of the dead, but the historical experience of self-preservation of life from diseases, which gives rise to a certain technology and burial rites, including religious ones. There is another side to this issue: the rites of burial of the dead among ancient peoples arise before religious beliefs. As soon as our animal ancestors turned into humans, that is, they began to engage in labor, they began to observe measures of protection against diseases. Disease and death are the eternal companions of life. Health is the foundation of a healthy life and the root cause of measures to protect it from disease. In philosophical language, we can say that human health and activities for its protection and restoration, if it is lost, is the primary, eternal cause, or substance of medicine and all historical forms of public health activities.

Even in the primitive era, health was recognized not only as the primary basis of medicine, but also as a moral concept — good. The famous Bashkir philosopher and researcher of the moral culture of the Bashkir people D.Zh. Valeev noted that “Good and evil, as the most ancient of moral concepts, in their existence are determined by the boundaries and conditions of human existence, by the fact that there are life and death, youth and old age, health and illness, warmth and cold, etc. etc. That is, those that support life, and those that deny it."

From the modern level of science and practice, medicine is understood as "a system of scientific knowledge and practical activity, the goals of which are to strengthen and maintain health, prolong the life of people, prevent and treat human diseases." This side of medicine and all health care activities of society has been and remains stable, constant. But the means and forms of health protection are changeable. Among the ancient peoples, the first medical knowledge arose and developed within the framework and at the level of the so-called traditional medicine. Traditional medicine was not yet a system of scientific

knowledge, but its goal was the same, namely: strengthening and maintaining health, preventing and treating diseases, prolonging people's lives. Health for a person at all times was considered the value of life itself. Life, organism and health were considered as a whole.

Acquaintance with the historical experience of traditional medicine also reveals the constancy, stability of the inextricable connection between the health care activities of people with nature. For the reproduction of their life, preservation of health, products of plant, animal and mineral origin were used as means. So, according to V.Z. Gumarov, the Bashkirs in their folk medicine used 100 names of plants, 22 names of products of animal origin and 32 names of mineral substances as therapeutic agents.

For our study and subsequent conclusions, it is important to list here the V.Z. Gumarov, remedies of folk medicine. These are: from the plant world — wormwood, bitter hellebore, rye, kalina, onion, sage, valerian, wheat, fragrant chamomile, wolf berries, strawberries, small-leaved linden, annual sunflower, blackberries, blueberries, raspberries, black currants, cherries wild, lingonberry, lemon, mountain ash, cranberry, oregano, resin of conifers, celandine, tea, burdock, red clover, coltsfoot, St. John's wort, large plantain, etc.; only 100 items.

From products of animal origin — bear meat, honey-lard, bear bile, human saliva, honey, badger meat, badger fat, horse meat, horse fat, butter, pigeon meat, goose fat, blood of domestic animals, katyk, kurut, kumis, skins of domestic animals, bile of domestic and wild animals, ghee, human urine, medical (pharmaceutical) leeches, milk.

From minerals — white clay, chalk, gold, petroleum jelly, gunpowder, slaked lime, laundry soap, sulfur, ash, sand, soot, silver, scented soap, kerosene, silt, mint oil, cologne, powder, saltpeter, turpentine, mercury , land, river water, lake water, alum, etc.

The listed and other remedies for ancient people were not just ready-made products of nature, which many of them are usually for animals. People specially, purposefully collected them, mined, produced them. In the modern language

of social philosophy, it can be said that traditional medicine was involved in the sphere of material production and all social life. Its goal was the preservation and reproduction of health as the root cause of health care in general. In folk medicine, a person has already acted not just as an organic part of nature, but also as a social being, in which the biological and social, as well as the subject and object of health care activities merge: his activities for the preservation and reproduction of health were directed at him as an object, and as a subject, he himself purposefully carried out this activity.

V.Z. Gumarov, A.A. Kulagina, A.I. Veretennikova and other scientists, historians and medical practitioners note that, until 1913, diseases such as smallpox, typhoid fever, cholera, trachoma, malaria, tuberculosis and others. Scientists see the causes of diseases in the past in the "insufficient nutrition" of people, life from hand to mouth, eating in a hurry, spoilage of food, in forced exhausting labor, material insecurity, unsanitary conditions of existence, lack of sanitary assistance, that is, in socio-economic conditions affecting per person, along with nature, as factors of health.

With the entry of people into the stage of civilization, when the state begins to deal with the protection of health along with the family, human life and health become objectively dependent, along with natural and socio-economic conditions, also on the activities of the state and its institutions.

The ability of health to satisfy the system of material and spiritual needs of a person, as mentioned above, is largely dependent on the specific historical level of development of society, on the impact on the biosocial organization of a person of natural-ecological, anthropogenic, technical and technological, economic factors, as well as on activities the state. There is an objective need to develop a social system of health-improving measures, to clarify the directions of medical sciences, to create new forms of medical assistance to the population. Taking into account the climatic conditions of living of people and the nosological specificity of diseases caused by them, they create "Polar Medicine" (The Academy of Polar Medicine and Extreme Human Ecology operates in Russia.

"Tropical Medicine", for patients in need of emergency care, — emergency medicine. C Taking into account occupational diseases at large enterprises, with the availability of appropriate material and financial resources, both in the conditions of the USSR and in the modern conditions of the Russian Federation, health protection services for working personnel were created and maintained.

The variety of forms of organization of medical care to the population is also due to the variety of forms of ownership in the healthcare system. In this regard, in Russia there is a state so-called budget medicine, private medicine, insurance forms of medical assistance to the population.

In modern conditions, when natural disasters such as earthquakes, floods, forest fires, etc. have become more frequent, mankind, societies and states will have to organize special forms of medical care — "Disaster Medicine" where it does not exist yet, and improve her where she already works.

The philosophical aspect of thinking about natural disasters makes modern society think about determining the place of man in relation to nature. Agreeing with the already known recognition of the inseparability of man with nature, we have to repeat an even deeper truth that man, as a supreme being with reason, does not stand above nature, but is inside it. And his mind, universal in its ability to penetrate the secrets of nature and create science and technology, he must use to warn of the dangers of probable and expected cataclysms.

Here, in the course of studying the specific historical features of the organization of public health activities, the question of the time factor necessarily arises. The time factor decides the specific historical features of the interaction of a stable, constant, or substantial, in the development of society and a changeable, moving one. At the same time, he also determines the variety of forms of organization of his health care activities. To this feature of the time factor in health care, we add another important feature of the functioning and development of health. On the one hand, health, in its internal structure, is due to the multidimensional biological system of the organism and a specific, holistic state at each given moment and stage of life, on the other hand, to the complex impact

of external natural and social processes on it in historical time. Generally formulating the thought, let's say that in the time factor in the health care sector, we distinguish between a moment and a stage of time, on the one hand, and a long historical time, on the other.

The principle of historicism in the study of human health confirms that concern for its protection is the eternal root cause, or the substance of all forms of medicine and health care as a constantly self-regulating system, depending on the specific historical conditions of the development of society and nature. The principle of the substanceality of health is directly related to all forms of organization of medical care for the population not only in Russia, but also in other countries at all times of history.

3.2. SOCIAL SPHERES AND INSTITUTIONS AS FACTORS OF HEALTH

Social spheres and institutions within the framework of cultural and historical factors of human health include, first of all, the generic characteristics of a person and their organization — work and work culture, health care systems, education and others, which we will explore in separate paragraphs.

In the socio-philosophical aspect, the eternal and leading cultural and historical social factor of human health is the culture of labor — labor as an interaction between man and nature, in the process of which a person modifies the substance of nature, consumes it and thereby reproduces his biosocial organization and life, his culture, material and spiritual wealth

The state of health of the population largely depends on the level of labor culture, on its scientific organization, conditioned by a given civilization. Sociological research uses such medical and sociological concepts as occupational diseases, disability (permanent or temporary), and disability (of various groups). Disability arises not only from illness, but also due to industrial accidents. In connection with the problem of preventing diseases, disability due to work, the

problem of labor protection arises. All these and other phenomena, processes in the protection and reproduction of public health, as well as their reflection in statistics, sociology should have comprehensive scientific-theoretical and socio-philosophical substantiations.

Labor activity for a person at all times of history was not only a source of material and spiritual values, but also a sense of satisfaction, joy, if it turned out to be useful in terms of goals and results. Bonded labor, on the contrary, brought a state of oppression and injustice. From the point of view of axiology, a section of philosophy about values, work still has a high value today. However, in the concrete historical conditions of the development of civilization, it brings a man of labor not only joy, but also grief. Such factors undoubtedly include low wages, alienation of labor from the needs and interests of the employee. Unemployment brings suffering to a person and damage to his health. In modern conditions of the labor market, its organizations in private enterprises quite often, as we know from television broadcasts, violate the legislation of the Russian Federation on labor protection and the scope of its application. The main reason for most cases of violation of labor protection legislation in Russia is the low general historical culture of the personality of employers. The most characteristic is the quite understandable desire of the employer to make a profit from production, but, unfortunately, without scientifically substantiated economic calculations. In the calculations, the personal interest of the employer prevails, without taking into account the interest of the employee. There are frequent cases of fraud, greed of the owner of the enterprise.

In the conditions of modern Russia in the sphere of labor organization, division of labor, its payment, labor relations resemble the era of initial accumulation in the countries of Western Europe and America of the 18–19 centuries, of course, taking into account the peculiarities of modern Russia. In this respect, Russia has already experienced the difficult experience of both the “bottom” and “top”, that is, both ordinary employees of enterprises and the leading elite of the state.

Competition of workers in the labor market is characteristic of modern, post-industrial civilization. Industrial labor, provided with a computer program, would seem to be easier than hard manual labor, as it was in the era of agricultural civilization. However, the modern industrial labor process requires professional education, high mental stress, a strong, stable psyche. And you need to study, have the appropriate skills and abilities to get your place in the life of work.

The socio-philosophical aspect of the role of labor and its impact on the health of a modern person is increasingly associated with the world labor market. On issues of employment, unemployment, the international division of labor and the associated migration of the population from one country to another, the influx of refugees into Russia from the former Soviet republics of the USSR, international organizations admit a double standard, maybe even an attitude like “the worse for Russia , the better for Europe and the United States. "The goals of improving the Russian economy, increasing the well-being of the population and, of course, strengthening people's health could be facilitated by world trade not only in medicines and the equivalent exchange of them, but also by Russia's participation in the creation of an international transport infrastructure. Russia transports energy resources to the developed countries of Europe through the territory of the Slavic states that have received sovereignty from Russia — Ukraine, Belarus, but, again, unfortunately, the relations of these states with modern Russia are poor.

Social philosophy cannot but be interested in the prospects for the development of relations between Russia and the countries of Eastern and Central Europe (CEE) from the point of influence of these relations on the Russian economy, on labor productivity and, through it, on the social and health welfare of the population. Major Russian scientists note that “In the future, the development of relations between Russia and the CEE countries will be influenced by the new geopolitical alignment of forces and the spheres of influence emerging under the influence of integration processes in Europe. The next enlargement of the EU

(European Union — Iv.) Almost exclusively through the accession of the countries of Central and Eastern Europe will ensure the creation of a new political and economic entity uniting 28 countries with a population of 550 million people and a combined GDP of $ 7.7 billion the EU market for the CEE countries was accompanied by a rapid increase in export deliveries from Eastern to Western Europe. At the same rate, counter deliveries expanded. Opposite trends are characteristic of the commodity turnover of the CEE countries with Russia". In the context of the above tendencies of world development, Russia has to overcome the negative tendencies for it and make every effort to create favorable tendencies, including the problems of improving the well-being of its citizens and strengthening the health of the nation. It seems to us, first of all, to solve the problem of unemployment and employment, creating jobs with the prospect of fully employing able-bodied citizens with productive labor.

For social philosophy, first of all, it is important to establish the categorical status of a concept. In this respect, labor, along with nature and the bodily organization of man as its prerequisites, is a generic sign of man. Collectivity and consciousness are added to it. Collectivity arises in the process of the long evolution of anthropogenesis as overcoming the barrier that stood before the human ancestors — hominids. By the way, the topic of this barrier in philosophical anthropology has not yet become the subject of comprehensive research. It has been experimentally proved by English Darwinian naturalists that if in a spacious shed inaccessible to chimpanzees, put oranges loved by primates into a hole on the ground, while they are curiously observing this procedure, fill the oranges with a heavy stone and then open access to them, then the monkeys run to the stone, to take oranges and feast on them. But here the indicated barrier arises: the leader of the group stands on a stone and with one roar disperses everyone, dances with the joy of the possible possession of oranges, descends from the stone and tries to lift it, but the stone is too heavy and does not lend itself to one leader. A person would simply invite friends and get a bait, but for the mon-

key's brain the instinct of only individual seizure of food for only individual consumption, this barrier is insurmountable.

In human life, the principle of collectivity as one of its generic characteristics means that when an object, phenomenon or process is inaccessible to the efforts of an individual, people resort to collective, joint actions as a high-level community, qualitatively different from the coordinated herd action of wolves and some other animal species. In this, the unity of the individual and the social in the life of people is manifested and confirmed.

In the life of a modern person, when his health is threatened by unexpected, not always definite, rather uncertain and probabilistic diseases and health-destroying natural disasters, technical accidents and disasters, timely actions are necessary, collective on the scale of a group of professional specialists and even states. This requires interstate treaties and agreements, the participation of the World Health Organization, the United Nations and their structures and other international associations.

To the generic characteristics of a person, as noted above, is conscience. It is important for our research that neither labor nor collectivity as generic social factors of health can function without the participation of consciousness.

Consciousness sensitively and comprehensively reacts to numerous health factors, analyzes the information received from them, programs possible and necessary actions and activities, accompanies them, while correcting the mistakes and mistakes made, and thus conducts continuous work in order to preserve health and restore it, if it is violated.

Consciousness carries out work on the protection of individual and public health in all its forms: moral, economic, legal, aesthetic, religious, philosophical, political; in all spheres of life, work, rest, entertainment; in all social institutions: family, education systems, health care, physical culture and sports and others.

The factors of health in the social sphere are also the living conditions of life, the quality of food and the corresponding public and state services, which have a known potential for preserving and promoting health. In this regard, it

becomes necessary to recall the popular saying that man does not live by bread alone. However, in the socio-philosophical plane, with the same basis, it can be said that a person does not live in a single spirit. In a person there is no spirit without matter, there is no psychic without bodily. A person needs a good mood, communication with other people, normal food, clothing, housing, fuel — his health depends on this. This is the most elementary and at the same time fundamental truth for medicine and health care of all forms.

The established traditional social institutions of the cultural and historical series, which have enormous health potential, include the education system, which, by its natural purpose, is designed to equip the younger generation with scientific knowledge and professional skills. In the training and education program for preparing for a future profession and specialty, a mandatory place is occupied by knowledge about a person as a biological species, the nature of which is revealed not only in the anatomy and physiology of his body, but also in medicine, valeology, hygiene, psychophysiology and other health sciences. We must agree with those scientists who welcome the emergence of such a science of health as valeology, who believe that knowledge about the protection and protection of health has the properties of health factors. At the same time, the condition for the propaganda of health sciences, which is set by Academician of the Academy of Polar Medicine and Extreme Human Ecology, Doctor of Medical Sciences, Professor B.N. Chumakov, is quite legitimate. “I don’t want to offend experienced biologists,” he writes, “but the specificity of medical knowledge and special terminology should be conditioned by clinical thinking and knowledge of medicine. Although in recent years engineers, geologists and housewives have been writing about health ... I admit that the printed leaflet is democratic, but ... I think what I am convinced of is that steel should be cooked by a steelmaker, treated by a doctor, taught by a pedagogue!

The teaching of medical educational disciplines has been introduced in higher pedagogical universities. This is a good thing. However, we are talking about enriching and concretizing health knowledge for children and youth in

kindergartens, schools, educational institutions under the valeology program as a science of a healthy lifestyle for everyone, including healthy people. It is believed that, unlike medicine, which studies human diseases and ways to cure them, the main subject of the study of valeology is health, the study of the regularities of the functioning of a healthy organism.

Without opposing the above views on the role of health knowledge as factors of human health, especially of young people, we believe that all social spheres and institutions should deal with the health problem.

The most important traditional spheres and institutions in society, specialized in the treatment of human diseases, are health care systems and pharmacology with pharmacy.

3.3. STRUCTURAL INTERACTIONS IN THE ECONOMICS OF MODERN HEALTHCARE AND PHARMACY

The economy is the basic substructure of the social system and the most important indicator of its cultural and historical level. Along with other factors of social development, it has a decisive impact on the formation and change of the way of life of the nation, the people and, through it, on the preservation or deterioration of the health of the population.

Taking into account the specifics of pharmacology and pharmacy, we will consider them separately from the economics of health care, although in the socio-philosophical aspect they are part of a single system.

In the context of market development in Russia, the economy is becoming more complex in its structure, more and more expensive. In this regard, a methodological problem arises of understanding the processes of interaction between different levels and new structural formations in the economy of society as a whole, on the one hand, and in the health care economy, on the other.

The most general requirements for the study of the problem posed are at least three methodological principles. The first is the human need for full health

as the embodiment of all the properties of life, in the preservation of a dual, biological and social nature and the resulting objective need for health-protective activities. The second principle stems from the general historical trend of rising costs for the creation and improvement of the health care system by society. At the same time, the methodology we use expresses the dependence of the health care economy on the economy of society as a whole, which in this respect acts as an integrity, as a self-sufficient system. The rest of the general methodological principles of studying the problems of the economic foundations of health care and their formative effect on the way of life of people and its reverse impact on the development of health care are revealed in the course of the analysis.

Considered in a methodological aspect, the economics of health care, of course, requires the use of general philosophical, socio-philosophical and general economic categories, such as interaction, structure and functions, the cost and value of human health, the same medical service as a product, commerce, etc.

The initial subject of analysis is a person with his need for health as the core of the health care system, as its backbone element. Since a person is not only a biological, but at the same time a social being and existing in constant activity, then his health care activity, activity or passivity in relation to his health forms his certain behavior and the corresponding way of life and the corresponding objective and subjective requirements for the health care economy. Since the latter, i.e. the health care economy depends on the general economy, national and in a sense even the world economy, then in our study a complex network of interactions arises. From this network, we select for research structural interactions in the health care system as a basic component of the lifestyle of the population and a factor of human health.

The biological (bodily) organization of a person objectively needs food, clothing, shelter, fuel and other means of livelihood. Full satisfaction of these vital needs provides a person with a normal state of health, which allows him to carry out the production of livelihoods in the necessary, constantly growing siz-

es and scales. In this regard, material production, on the one hand, and the organization of health care, on the other, manifests the unity of the biological and the social in a person, in his health and life.

This pattern also operates in the health care economy as a relatively autonomous subsystem of society. In accordance with it, the society creates the material and technical base of health care, prepares professional personnel (doctors, nurses), develops medical science, organizes a complex of medical institutions, specialized management bodies. All these components of the health care system characterize a specific structure inherent only to it.

If we cite the Republic of Bashkortostan as an example, then diagnostic centers, hospitals, dispensaries, sanatoriums, equipped with the latest achievements of science and technology, which have been established in the last decade, now function here. They employ teams of highly qualified specialists — doctors known throughout Russia. It is clear that for the normal operation of such a complex system, society and the state, as civilization develops, spend huge, ever-increasing material, labor and financial resources.

In the market economy of health care, for its knowledge, the basic concepts are the need for complete health, health as a commodity (the labor force of a healthy person), the cost and value of health and medical services.

The rise in the high cost of human health and medical services in the post-industrial era, which is also called informational, is due to constant and current reasons (factors). *Constants include — complexity, multidimensionality, inconsistency of the state of the human body (basic factor):*

- aging of a person, which leads to a decrease in working capacity and, accordingly, to a decrease in the cost of his labor force as a commodity with a steady increase in the cost of maintaining and reproducing his life and health (medicines, food, clothing, housing, fuel and other material, social and spiritual needs);
- susceptibility of the human body to diseases, a variety of nosological types of diseases;

- an increase in risk factors for human health (natural cataclysms, man-made disasters, accidents, new and little-studied diseases, etc.);
- an increase in expenses for medical services due to population growth, for training personnel (doctors, nurses), for maintaining, updating and improving an increasingly resource-intensive and science-intensive material, technical, scientific and technological base of health care, while increasing life expectancy and increasing the number people of retirement age.

The current factors in the rise in the cost of medical services and the maintenance of the health care system in Russia include changes in the socio-economic conditions of society as a whole. This is, first of all, the need to compensate for losses from ruin in rural areas and small towns of small enterprises in competition with large ones and the resulting increase in the number of unemployed and a decrease in the volume of funds received in the compulsory health insurance fund. This is especially true for the economy of small towns.

Historical experience confirms that the rise in the high cost of public health activities, and especially in such a specialized area as the health care system, is a general historical trend.

The economy, unlike other spheres of social life, develops in the process of interaction of such structural components as production and ownership of resources, their use, distribution, exchange, consumption. This structure is inherent in the health care economy, its goal, as well as the goal of the economy of any sphere of society's life, is the production of goods and services with maximum efficiency at the minimum cost of material, labor, financial resources.

In connection with this goal of economics, the methodology of cognition of economic health problems requires a principle that has the status of a principle of the general theory of human health.

The fact is that in the economy of health care in the broad sense of the word, the cost of a medical service includes a whole range of costs — for the maintenance of its material and technical base, training and remuneration of their labor in medical institutions, costs for sanitary and epidemiological ser-

vices, drug provision patients, requiring a special branch of social production — the pharmaceutical industry.

In general methodological terms, the costs of health care should also include the cost of human health, the cost of vitality and life, because only a healthy person can work for his own joy and for the benefit of society. In addition, the maintenance of a healthy person to society and the state is economically cheaper than the maintenance of a sick person. In terms of humanism, the cost of health and the cost-effectiveness of its preservation or restoration is difficult to determine with specific financial costs and resources, since it (health) is the highest value as the first condition for the fullness of life and in this sense goes beyond cost estimates.

In this regard, in the knowledge of the economics of health care, the principle of three-dimensional measurement of efficiency is important: medical, economic and social. It is clear that the costs of providing services to an incurable patient, either in the medical or in the economic dimension, are irreversible, which is quite observable in microeconomics. But at the level of macroeconomics, on the scale of the state, in the moral consciousness of society, the defining principle of medical services is humanistic, that is, the recognition of the need for all three of the above forms of measuring efficiency, because in medicine the irrecoverable costs of treating an incurable patient express society's recognition of human life and health as the highest values ... The rest of the values serve to preserve and improve these higher values.

The principle of economics and the principle of humanism in these relations, although they stand on opposite sides of the problem under study, in reality are complementary, that is, they complement each other and are inseparable components of a single biosocial organization of a person. In the methodology of structural interactions in health economics, these principles should be considered as harmonious integrity, it is not by chance that the requirement is recognized in practice: the whole society pays for the patient.

In the complex, diverse structure of modern health care, its most important component is financing. There are two types of financing systems in Russia — public and private.

Private medicine in the country has not yet become widespread, it will certainly develop, which is confirmed by world experience.

The system of state financing of health care in Russia operates in two types — in the system of compulsory health insurance and in the system of budget financing. Has the right to exist and voluntary health insurance at the expense of the financial savings of the citizens themselves.

It is possible to understand the peculiarities of budgetary financing of health care in Russia only by revealing the essence of the so-called “residual principle”. Its origins are rooted in the theory of social reproduction, according to which only the creation of reproducible material goods was recognized as productive labor, which was included in the so-called aggregate social product (GSP). The service sectors, including health care, were not included in the “productive” sphere and belonged to the “unproductive” sphere of activity. Based on such a theoretical premise, the state in its budgetary policy allocated the health sector, as well as other social spheres, funds on a leftover basis, that is, only those that remained after material production (industry, agriculture, construction, freight transport, etc.).

In the current conditions of Russia's transition to a market economy, the residual principle of health care financing has completely outlived itself.

And even if Russian society and the state are still economically unable to abandon this principle, then in the future, in economic consciousness and thinking, they would constantly have in mind as a strategic goal to completely overcome the residual principle of health care financing and reach a higher level of health care financing.

When assessing, planning, forecasting the efficiency of the economy of social spheres, which include health care, it is more useful to proceed from the needs of today, as well as comparing the level of development of your country

with the level of more developed countries. Such a methodological approach aims society at overcoming social utopias and illusions that doom society and its economy to stagnation, and mobilizes people for creative work. After all, it is creative work that is the leading factor in progress and well-being.

An important methodological role in understanding the economics of modern health care is played by the concept of "level of functioning" of the economy, in contrast to the concept of "level of development": the latter, as you know, means the result of the functioning of society in time as a progressive process of its change. The concept of "level of functioning" means the interaction of structural elements of an object as a system, in our study — the economic health care system.

The modern economy functions at least at three traditional levels and, accordingly, theories of organization, management and development — microeconomics, macroeconomics and the world economy (megaeconomics). The subject of microeconomic theory is the primary organization — a firm (enterprise, institution). Macroeconomics operates on a national-state scale, and the world economy — on the scale of international relations.

The trend towards an increasing role of the state in financing health care and the dependence of microeconomics on macroeconomics is clearly visible in the sphere of world economic relations in connection with globalization.

Globalization as a trend towards world economic integration has not yet emerged as a peaceful cooperation of peoples and states; which would contribute to a satisfactory solution to the problem of modern human health.

The world economy in the context of globalization functions as the domination of economically powerful states, in the economy and politics of which transnational corporations play an important role. The pressing issue today is to reveal the role of the world economy. Microeconomics, as well as macroeconomics on a national scale, are today largely dependent on the world economy.

With a strict, demanding approach to health care reform in Russia, a successful introduction of health insurance was expected in the area of financing.

So far, positive shifts have been observed in individual constituent entities of the Russian Federation.

The objective trend of world development in modern conditions is the globalization of the economy. And no matter what positive or negative changes it brings to the life of peoples, it can no longer be stopped. It is now more useful to talk about the creation of mechanisms for regulating globalization processes in order to use them for the benefit of people. The initial principle of this mechanism may be the recognition of de facto globalization and its consolidation by the United Nations, indicating their right to take restrictive measures in cases of threat of certain globalization processes against the peaceful cooperation of states and the well-being of peoples.

In the internal policy of the state in modern Russia, there is a lot of work to be done to normalize the interaction between the processes of commercialization and humanization of healthcare. This is a methodological problem of social philosophy.

In accordance with the Federal Law of the Russian Federation "Fundamentals of the Legislation of the Russian Federation on the Protection of Public Health" (1993), the main functions of the Ministry of Health and Social Protection of the Russian Federation include, among others, the development of a procedure for licensing the activities of the medical and pharmaceutical industries and certification of their products. In recent years, the trend in this area is the displacement of traditional drugs without taking into account their effectiveness in favor of "newer means". For example, medical turpentine, which is an effective remedy against pulmonary candidiasis, characteristic of patients with bronchial asthma, but it is removed from the list of mandatory nomenclature of drugs in pharmacies. The reason for this approach is predominantly economic: raw materials for the manufacture of medical turpentine — resin of coniferous trees used to be produced for next to nothing by the forestry enterprises in accordance with the state planning task, now this tricky and time-consuming business has gone into the sphere of commerce and is considered economically ineffective.

Methodologically, in the “litigation” between the principle of commercialization and the principle of humanism in medicine and pharmacy in modern socio-economic conditions in Russia, the principle of commercialization still prevails, which does not always and not always serve health. This is evidenced not only by the positive, but also by the negative experience of the commercialization of the economy in Russia, but also in the Western countries. It is wrong to think that the commercialization of the economy serves as a "panacea for all evils."

The commercialization of any business means the production of goods and services for the sake of profit. In the socio-philosophical aspect, we are talking about the fact that if in health care as a system the goal of strengthening human health as a system-forming factor is replaced by another goal — making a profit, then this system will lose its systemic properties and turn into a qualitatively different system. The health policy of the state must find control mechanisms in order to prevent the degeneration of the health care system. Society and the state are facing a difficult task — to overcome the discrepancy between the principle of commercialization and the principle of humanism in healthcare.

In connection with the commercialization of health care and the rise in the cost of medical services, the facts of bribes and corruption, money is fetishized, when money is given magical properties: as if money can buy wealth and health.

Health is the first wealth for a person. But it is better, more moral, more honest to earn money by conscientious work. Then, with a clear conscience, you can pay for your health.

The functioning of the health care economy is inextricably linked with the economic consciousness of the population. In the realization of the economic needs of the population and goals in the conditions of mastering the laws of the market, the economic consciousness of individuals acquires an ever-increasing role, which has a certain impact on their way of life.

When they say that in conditions of a deep social crisis, “spirituality” falls, meaning primarily moral values and principles, then this not only does not diminish the role of material living conditions of people, economic relations,

economic consciousness, but, on the contrary, presupposes an inextricable connection between all spheres life of society. This explains the fact that in the educational standard of the Russian Federation, along with philosophy and economic theory, ethics, aesthetics and other humanitarian disciplines are studied.

For university training of specialists in medicine and health care, it is necessary not only to have knowledge of modern economic theories and concepts, including the economics of modern health care, but also to consider them in the system of general cultural and methodological knowledge, taking into account historical experience. The latter in the curricula of universities should be represented by the experience not only of any country, but in the aggregate of countries, taking into account world experience, not only of the concept, but in their complex. The principles of unity in diversity, a concrete historical approach to the country under study here can become the most correct in the study of both economic ideas and perceptions, and the entire structure of public consciousness, the knowledge of which will make it possible to conduct economic policy more effectively.

The economic policy of the state in the field of health care presupposes its management. In connection with the introduction of the laws of a market economy in this area, the requirements are increasing, first of all, for executives — from the chief physician of a medical institution to a minister. In the conditions of the complication of its already multidimensional structure and dynamic functioning at all levels, the leaders of the healthcare system must be not only experienced doctors, but also have a good knowledge of the modern market economy and its legal foundations. In microeconomics, the chief physician has to competently solve the problems of programming, planning, forecasting his institution, supply and demand, marketing in the market conditions, pricing and price of medical services, competition, investment, acquisition and implementation of new technology, drug supply, remuneration of doctors in a timely manner. and nurses, etc. Employees of departments of ministries, ministers need to be well versed in the role of the state in economic life, budget and tax problems, income

policy, effective use of money and loans, the financial market, to fully know the needs of pensioners, disabled people, their social psychology.

In society, positive expectations arose from the planned structural changes in the training and placement of personnel in the organization of medical care for the population, the establishment of the posts of general practitioner, family doctor. We believe that the latter, that is, the introduction of the posts of general practitioner and family doctor, should not lead to the reduction of highly specialized doctors, but introduce them in addition to the existing, already proven nomenclature.

With the growing education and healthcare culture of parents in families, people have become more interested in medical literature, many have the skill and skills of the procedure for intramuscular and intravenous administration of drugs to sick family members. They need a doctor — a consultant to treat patients at home, etc. All this could reduce the cost of providing medical services to the population.

In the era of post-industrial civilization, as social consciousness becomes more complex in the life of society, the role of individual economic consciousness and behavior increases. In the healthcare sector, as the most important component of the structure of the way of life, every citizen should be imbued with the consciousness of personal responsibility for their health and at the same time actively participate in the implementation of the important, historically confirmed statement that the health well-being of citizens depends on the economic wealth of society. The whole society is fighting for the restoration of the health of citizens; solidarity works here. This is a great economic benefit to everyone: both sick and healthy.

Hard work for oneself and for society is the condition for the physical, mental and social well-being of a citizen.

Traditionally, pharmacology and pharmacy are adjacent to the health care system. Acquaintance with this area of health care shows that it should be considered in the aspect of the interaction of biological and social in the health of a

modern person. This aspect is due to the specificity of pharmacology and pharmacy that they interact in two areas — in the field of intraorganismic physiological processes, namely in the interaction of the human body with drugs, on the one hand, and in the material production of drugs by the pharmaceutical industry, on the other.

The relevance of the topic we have formulated is determined by the ever-growing importance of the health of a modern person. A modern person lives in a post-industrial era and experiences all its inherent advantages (in comparison with previous eras) and negative aspects. Advantages are seen in the possibilities of widespread introduction of scientific and technical achievements into practice and their use in order to improve human life, strengthen and protect his health as the most important condition for completeness of well-being.

Negative aspects and difficulties in the life of a modern person, negatively affecting his health, are due to insufficient harmonization of social relations and the interaction of society with the surrounding external nature, the lag of the health system from the growth of the needs of the population, especially patients in health, treatment, and medicines.

The key category in the context of which we consider the formulated problem is pharmacology — the most important branch of medicine that studies the features and laws of the interaction of drugs with the human body. In this sphere of interaction, there is a whole world teeming with dialectics, which has not yet been fully explored, primarily due to the infinite complexity of the phenomenon of man and his organism.

The interaction of drugs with the human body in medicine has been known since ancient times — this is the prevention of diseases of the body and its treatment if it is sick. For more than forty thousand years of human civilization, the human body has not undergone qualitative anatomical and physiological changes. He, just as in the distant past, is subject to disturbances in the functioning of certain organs, certain areas in the organs, as well as the whole organism.

The human body in its internal, anatomical — physiological organization is a biological system, at the same time complex, multidimensional. A person lives thanks to the interaction of the internal structural elements of his body with each other — cells, molecules in cells, organs, as well as interaction with the external natural and social environment. The social environment is the people themselves. In the process of this interaction, the human body assimilates, modifies and consumes the substance of nature, containing enormous energy, and thereby reproduces its life.

Among the substances useful for health and life are natural or cultivated products of plant and animal, that is, biological, as well as mineral origin. In medicine, after appropriate processing, they are used as medicines. Currently, there are more than 30 thousand medicines (preparations) and hundreds of thousands of their modifications in the world.

Modern science has identified a number of stages in the development of new drugs. The most scrupulous and responsible stage is the stage of preclinical study of the biological activity of substances designated for their further study. At this stage, the therapeutic efficacy of the drug and its effect on the body's systems, as well as possible side reactions associated with pharmacological activity, are determined. Further, toxicological studies are carried out in order to establish the damaging effects on the organism of experimental animals. There are three stages of toxicological studies: 1) study of the toxicity of the drug with a single injection; 2) determination of the chronic toxicity of a substance upon repeated administration for one year or more; 3) the establishment of the specific effect of the compound (oncogenicity, mutagenicity, effects on the fetus, etc.).

The main content of the next stage is clinical trials of a new medicinal substance in a medical institution. Establish tolerance and therapeutic effect first on a limited number of patients (5–10 people) on volunteers, then on a group of patients (100–200) people, and in the control group. To obtain reliable data, a "double-blind" method is used, when neither the patient nor the doctor, but only the head of the trial, knows which drug is being tested. At the final stage, the

goal is to obtain additional information about the investigated pharmacological agent. At the same time, studies are being conducted on hundreds and thousands of patients, both in inpatient and outpatient settings.

A vivid dialectical picture of the interaction of biological and social in human health can be observed in the process of antimicrobial therapy, that is, in the treatment of an infectious disease that arises and develops in a complex complex of two organisms — humans and bacteria. The initial state of the human body and the virulence of the microorganism (the degree of its pathogenicity) largely determine the course and outcome of the disease. This process is of particular interest for our research, because here two organisms interact — a human and a bacteria. Bacteria are the lowest forms of the biological level of the structural organization of matter, and a person is a qualitatively different level — biosocial, with the dominant role of the social. The use of drugs that act on bacteria makes it possible, in most cases, to decide the outcome of treatment in favor of a person. However, stable and complete success in the treatment of infectious diseases can be achieved only with a detailed assessment of the complex system of interactions of their components, which are a sick person, a microorganism and a medicine. Most likely, the most difficult task of pharmacology and pharmacy in this aspect is the creation of drugs with such properties that help the living cells of the human body to act against pathogens in a coordinated, cooperative manner, based on the laws of synergetics and thus to be generated in a timely manner, to restore their normal functions, self-organization.

Modern pharmacology classifies drugs into nineteen groups of diseases, each group, in turn, is specified by a multitude of subgroups of diseases and the corresponding drugs of treatment.

The most important principle of the choice and use of drugs is based on the objective laws of the interaction of drugs and the body, it expresses the general law of interaction and unity of biological and social in human life.

The pharmacological aspect of the interaction of biological and social in human health also implies the following most important principles of the use and use of medicinal substances for the healing and recovery of the human body.

Strict control over the correct, scientifically grounded, legally permitted use of specific drugs by doctors. This is especially true for narcotic drugs. It is known that narcotic drugs can be used by drug addicts, some people for the purpose of suicide. Control is also necessary in the fight against illegal sale of drugs, prevention and fight against drug trafficking.

The most important requirement of pharmacological and pharmaceutical activities is the observance of the principles of ethics by doctors and nurses, all employees of medical institutions. There are cases of theft of expensive and effective drugs. For example, a nurse, in accordance with the written instructions of the attending physician, is obliged to include (inject) a specific drug into the saline solution for intravenous infusion, but she (the nurse) does not follow this instruction and injects simply a saline solution without a drug into the vein, and the patient does not know about this and does not suspect. According to modern instructions, the attending physician is not required to participate in this procedure. A still unresolved moral problem is euthanasia.

The most important requirement of pharmaceutical activity in the socio-philosophical aspect of the interaction of biological and social in human health is the principle of humanism, the recognition of human life and health as the highest value, the conscientious fulfillment of the Hippocratic oath by medical workers and the whole society.

3.4. THE PROBLEM OF HARMONIZATION OF HEALTH FACTORS OF A MODERN PERSON IN THE CONTEXT OF ECOLOGY

The philosophy of medicine, before other worldviews, realized the impact of the environment on the life and health of people. Even the ancient sages, first of all, doctors drew attention to the significance of the properties of natural phe-

nomena for humans. The people have long known that the dwelling should be placed on a ground that is not subject to watering, so that it does not rot prematurely from excessive soil moisture, and so that it can be easy to breathe in it. When equipping a dwelling, people took into account that there was clean air, clean water, dense healthy vegetation, fertile soil for gardening, agriculture and cattle breeding nearby.

In modern society, the study of the role of the surrounding nature in human life has grown into the formation of a special science called ecology, a science that studies not only the influence of nature on the body and human life, but also the impact of man himself on nature and the entire world around him.

It has become relevant to look at the health of a modern person from the socio-philosophical positions of the interaction of health factors in the context of human ecology. Human ecology is so important for solving the health problem that the author of these lines proposes to include it in the socio-philosophical definition of the concept of "health" that we gave in the first chapter of this work.

Sociology of health care in the last decade has done a lot to reveal the importance of human health factors. Medical scientists note a whole complex of factors, scrupulously consider the specifics of each of them. At the same time, a large role is rightly attached not only to the way of life, socio — economic factors, but also to natural conditions and the state of the entire environment.

Philosophy in its social section is called upon, as we see it, to point to nature and its substance as a fundamental factor in life on Earth. The first physiological act of life that a child has just freed from the mother's umbilical cord is a breath of air, from which the body selects oxygen. The living human body inhales air every two seconds, makes about or more than 30,000 breaths and exhales during the day. This proves the amazing property of life to self-organize, transforming the substances of external nature into a complex and harmonious system of the internal world of the organism.

Oxygen, along with hydrogen, carbon, nitrogen, phosphorus and sulfur, constitute the substrate basis for the self-organization of life. Only these six of more than one hundred chemical elements form the basis of living systems. Their total weight fraction in organisms is 97.4%. They are followed by 12 elements that make up many physiologically important components of biosystems. These include: sodium, potassium, calcium, magnesium, iron, silicon, aluminum, chlorine, copper, zinc, cobalt. Their weight fraction in organisms is approximately 1.6%. Of the millions of organic compounds, only a few hundred participate in the construction of a living organism; out of 100 known amino acids, only 20 are included in proteins; only four nucleotides of DNA and RNA are the basis of all complex nucleic acids responsible for heredity and regulation of protein synthesis in any living organisms. The given chemical and biochemical composition of living organisms shows how rich and complex their structural organization is and how small their weight fraction is in comparison with the geological composition of the Earth and, consequently, how great is the responsibility of Homo sapiens for their preservation on Earth.

In the last decade, ecology has been rapidly developing as a science. In 1998, a book was published entitled "Natural Science and Fundamentals of Ecology." Its authors built their concept on the concepts of modern natural science, which allowed them, relying on the properties, connections, patterns of movement of the solar system, the Earth and its water, air, geographic shells, biosphere, the characteristics of the life of living organisms and the diversity of the organic world, to focus on obsession with the patterns of interaction of organisms with each other and with the environment. At the same time, the authors pointed to the role of ecology as the basis for nature protection, forecasting and management of ecosystems in the context of scientific and technological progress.

Reflections are important for philosophical studies of human health, i.e. reflections aimed at understanding a person's own actions and their laws. These laws, acting as principles of cognition, are formulated by the epistemology of

materialist dialectics and other modern concepts of epistemology. In the aspect of the philosophical problems of the health of a modern person, it is impossible to abstract from the principles of ecological philosophy. Their content is expounded in detail in the above-mentioned work by A.A. Gorelov. He attributes the following to the basic laws and principles of ecology. The law of the minimum, formulated by the German chemist J. Liebig (1840), boils down to the fact that a crop or any organism requires a minimum of the necessary substance. This law is concretized by the law of tolerance: the absence or impossibility of the development of an ecosystem is determined not only by a deficiency, but also by an excess of any of the factors (heat, light, water). Environmental factors of the environment of organisms depend on each other and act in concert. In this sense, limiting factors are both favorable and may not be favorable. For example, "an important limiting factor in modern conditions is environmental pollution ... The price of pollution is health, the price in the literal sense of the cost of its restoration."

Acquaintance and analysis of literature on environmental problems shows that environmental health problems in philosophical and socio-philosophical aspects are not sufficiently studied. Taking into account the needs for a wider coverage of the indicated topic of the socio-philosophical direction, we consider the poorly studied problem of harmonizing the health factors of a modern person in the context of anthropoecology. As factors of health in the context of human ecology, we take social spheres and institutions endowed with direct specialized functions of protecting the health of the population, as well as spheres and institutions that have the potential to influence the health of individuals and the population. The first group includes the health care system with its various specific historical forms of organization of medical care to the population, discussed in the paragraph "Specific historical features of the forms of organization of public health services"; the second group includes all branches of material and spiritual production, such as industry, agriculture, food processing, housing and communal services, family, education, science, and the state. However, in socio-

philosophical terms, in this case, we consider their ecological potential not individually, each of them, but in interaction from the position of harmonization. At all stages of the historical development of society, there is an uneven development of the spheres of public life, in connection with which their ecological health potential is not fully used. The task of modern society is to overcome this unevenness, this disharmony.

Let's pay attention to the ecological potential of health in the way of life of people. In the process of studying the problem of the way of life and the health factors included in its structure in a broader, in the socio-philosophical aspect, it becomes necessary to consider the way of life as a kind of system of behavior of the individual and the entire population under the influence of the natural and social environment. The author of this manual proceeds from the methodological approach that in health protection it is desirable that not only certain factors of a healthy lifestyle function satisfactorily, but all health factors in the complex of an individual's behavior and in the entire system of social relations in the conditions of the modern ecological situation.

Clinical practice of treating patients shows that in the health behavior of some of them there is not enough persistence and will in the desire to be cured. It is characteristic for them that quite normal hygienic behavior in one case or in relation to one rule is allowed multiple violations of another, third, etc. As a result, the health of the treated people deteriorates again, and the treatment must be started anew. Sociological observations confirm that this behavior is inherent in many patients of medical departments and institutions, especially children and adolescents. Children do not always see the danger in the fact that, rejoicing in the fluffy snow, they do not pay attention to its whiteness and purity, they take not quite clean snow in their mouths, etc. Children tend to play and shelter cats, dogs, not yet understanding by age and insufficient experience, the danger that these animals may be carriers of viruses and microbes harmful to human health. Sociological polls show that the hygienic education of children and adolescents is not given enough attention in kindergartens and schools.

Modern society knows that primarily young people use drugs. The drugs are specially made from plants and distributed. Consequently, drug addiction is a social, historical and cultural phenomenon. A fight against this evil is required. The results of the struggle largely depend on the personal culture of people.

When the lifestyle of an individual in health care is not orderly, unbalanced, does not agree with the requirements of not only systemicity in the strict understanding of high health care culture, but also elementary complexity, then medicine and health care as important factors of health will not fully achieve their humanistic goal.

In the public health system, both in medical and environmental terms, a great deal of work is called upon to carry out the sanitary and epidemiological service, which is a system of state institutions that carry out sanitary supervision, the development and implementation of sanitary and prophylactic and anti-epidemic measures. There is a sanitary protection of the borders, measures are being taken to prevent the entry into the country and the spread of quarantine and some other infectious diseases of humans and animals. In accordance with the legislation, sanitary protection zones (sanitary gaps) have been created between industrial enterprises and residential or public buildings to protect the population from production (noise, dustiness, emissions). There are adopted and continue to adopt new international conventions on the regulation of sanitary and quarantine measures in relation to a number of especially dangerous infectious diseases, such as smallpox, plague, cholera, yellow fever, the recently appeared bird flu, etc. However, epidemics are a massive spread of infectious diseases of the population in various territories and countries, significantly exceeding the usual level of morbidity, while taking place in the life of society. New types of influenza and animal diseases appear.

Difficulties in the fight against infectious and other diseases and in general in medical and preventive work in Russia are associated with many reasons. For example, a comprehensive assessment of the sanitary problems in the territories of the Kursk Magnetic Anomaly by the State Sanitary and Epidemiologi-

cal Supervision Center in the Belgorod Region showed that significant contingents of the population living in these territories for a long time are subject to constant combined effects of geomagnetic fields and man-made factors expressed in intensity. S. I. Saveliev, L. N. Karaseva, I.A. Shchukin from the Center for State Sanitary and Epidemiological Surveillance in the Lipetsk Region report on the results of their research that "for all districts of the region, the priority factor in the integrated indicator is chemical contamination of drinking water, nitrogen dioxide, dust, lead; the presence of harmful impurities in drinking water in concentrations above the maximum permissible ". "A.A.Rabegin, T.P. Grunicheva (the center of the State Sanitary and Epidemiological Surveillance in the Kaliningrad region) report that they have studied the risk to the health of the population of the region from environmental factors, such as transboundary transfers of pollutants from neighboring states, exceeding their own emissions; the danger of the importation of especially dangerous and quarantine infections; import in significant quantities of products potentially hazardous to health, as well as used industrial and household products; unsatisfactory quality of drinking water, iron content in groundwater is 20–60 times higher than standards. As you can see, environmental standards are violated not only within Russia, but also in relations with other states, international agreements on strict compliance with sanitary and epidemiological requirements are not being implemented. The above examples confirm that there is still a disharmony of environmental factors in combination with socio-economic factors.

One of the main factors in the preservation, and in a number of regions of the growth of morbidity, remains the uneven development of health care potential in the interaction of the health system with the system of social spheres and material production. In modern Russia and internationally, there is a problem of harmonizing human health factors. By harmonization we mean a coordinated, satisfactory interaction of all factors of human health, taken together, functioning as a whole. Ecological culture should take a rightful place among these factors.

In socio-economic terms, the concept of proportion is used instead of the word "harmony". Disproportion means a discrepancy between the parts of the whole. Proportionality is the simplest type of functional dependence in a complex or system. Proportionality in the context of interdependence in a system is that a change in one of its elements inhibits or accelerates the change in others.

This provision also applies to environmental factors of human health.

In etymological terms, the word harmony among the ancient Greek philosophers meant connection, harmony, proportionality of parts, the fusion of various components of an object into a single whole. In this aspect, the Greeks approached the cosmos as an organized whole, as opposed to chaos. In medicine, the term "risk factor" is used, meaning one of the factors contributing to the onset of a disease (for example, smoking as a risk factor in relation to myocardial infarction or cancer).

In Russia, the harmonization of health factors, primarily environmental, has long become a truly problem in the philosophical sense of the word. The first problem is the objective and subjective difficulty of resisting natural disasters, earthquakes, floods, forest fires, the expansion of ozone holes, and the spread of the Colorado potato beetle — the main pest of potatoes.

A striking example to illustrate the difficulties of the ecological aspect of cognition and solving the problem of harmonizing health factors in modern Russia can be the crisis of the housing and communal services (HCS), which has a direct impact on the health of the population. The housing and communal services crisis in the studied aspect is the accident rate of the heating complex, cold apartments, the stress of their inhabitants, colds. Characterized by constant, incessant discussions in society about how to be, what to do, how to deal with housing and communal services. But heat is one of the important environmental factors of human health in housing. Russia is a country with enormous natural resources, with the skillful use of which, probably, a satisfactory solution is possible not only to the problems of housing and communal services, but also to all other problems related to human health. Russia is a country with a huge scien-

tific potential, great scientific and technical discoveries have been and are being made in it. General ecology and applied ecological theories are being developed. And in such a country, with such a talented people, the disproportion and disharmony of the spheres of public life, including concern for human health and human ecology, have not been overcome for many decades.

We consider the question of the interaction of human health factors in the context of the state of human health (the individual and the population) in the conditions of modern civilization, when the ecological factor, it would seem, worked at the level of the requirements of this civilization. However, the health status of the population largely depends on the harmonization of all health factors, taken together in their coordinated interaction, on how society and the state will overcome the uneven development of various spheres and sectors of the national economy.

Excessive urbanization has a negative impact on human health in the context of modern civilization. In a modern city, the purity of air and water is much worse than in the countryside. There is more noise, harmful to health, exhaust of harmful gases from an endless string of cars, in old, not repaired apartments for a long time, the sewage system does not work well. Yes, and in a modern village is not very well with environmental safety; the level of air and water purity in rural areas is decreasing due to the unity of the ecosystem on a global scale. As a result of a sharp decline in agrotechnical and zootechnical culture in agriculture, as a result of protracted reforms, soil fertility, the yield of grain and vegetable crops, and the productivity of livestock have decreased. The personal ecological culture of a part of the rural population is low. Often, tractor and truck drivers, when refueling their cars with gasoline, do this important procedure carelessly, and a trickle of gasoline remains spilled on the ground; violate the rules of washing cars, carrying out this inevitable work near rivers and lakes, or simply in the yard in their personal household. All this, polluting the natural environment, negatively affects the health of the villager. The rural population traditionally lives near or near the forest. There are frequent cases of cutting bird cherry,

where it grows, just in order to easily remove the berries from a tall tree. The attacker is completely unaccustomed to thinking about the next picking season.

Poverty, poor nutrition, unfavorable living conditions, sanitary and hygienic conditions at all times belonged to the factors of the socio-economic cycle that directly affect the deterioration of health. In modern Russia, a significant part of the population is exposed to the daily impact of these factors. In socio-economic terms, the main reason for their persistence is low wages, unemployment, small amounts of social assistance to pensioners, benefits for mothers to take care of young children, payments to disabled people, student grants, poverty of school canteens and canteens, and in some cases — low sanitary and hygienic culture in them. There are frequent cases of poisoning of children in preschool institutions with spoiled food.

Low labor productivity and low wages as the main reason for poverty, which does not allow people to use the medicines necessary for the prevention and treatment of diseases, to have good housing conditions and other benefits, have become a terrible socio-economic tradition in Russia. The leading authorities of Russian science also began to pay close attention to this topic.

To solve these problems, along with reforming the health care system in modern Russia in order to increase the efficiency of its functioning, it is necessary to qualitatively improve both the ecological situation and socio-economic conditions, and improve the way of life, and take into account human genetics, his biology, generally speaking, complex and systemic the interaction of all factors of the health of a modern person, which also includes a political component.

The political component in the complex of health factors of a modern person is, first of all, the health policy of the state, closely linked to environmental policy. In the socio-philosophical aspect, increasing the role of the state in the implementation of programs of scientific and technological progress, their introduction into the practice of socio-economic, environmental activities in the modern era has become a global trend. It seems to us that in environmental activities it means, first of all, to modernize, and if necessary, to close down enter-

prises that pollute the environment. And in the socio-economic sphere, it is necessary not only to penetrate the world economy through the production of high-quality goods that can compete in world markets, but for this to harmonize the proportions in the domestic market of material production and social services.

The practical solution of the above-mentioned social, economic, environmental, political problems, directly or indirectly related to the harmonization of health factors of a modern person, largely depends on the level of socio-historical, ideological, moral consciousness of the whole society and the professional training of personnel working in all sectors of the national economy. , in all areas of life. The level of consciousness is nothing more than the concrete historical content of the spiritual culture of society, which is determined by both historical practice and education, enlightenment, and science.

In this regard, the literature has long debated the question of the content, forms and levels of education. It is known that the education system in today's Russia needs reforming taking into account the world level and the experience accumulated in Russia in the activities of secondary, higher education and post-graduate education. We believe that our national system of training specialists with higher education should be preserved, not allowing a reduction in the five-year term of study at universities. As for foreign experience, take from it only the positive that is capable of adapting to the Russian soil and will benefit society.

In the curriculum of the country's universities, it is imperative to include the discipline "Human Ecology", one of the sections of which would reveal the scientific and philosophical problems of human health.

Certainly, ecological culture has its origin in the family. The family as an ancient social institution is losing its traditional functions of raising children in a spirit of respect for nature.

The task of society, family, school, labor collectives, the state is to form in all children, all citizens a careful, loving attitude towards nature for the sake of the great goal - to achieve harmony between man and nature.

3.5. SELF-TEST QUESTIONS AND EXERCISES

1. Why health can be considered as a social phenomenon?

2. Expand the essence of the deviantological approach to public health; Describe the connections between sociological and psychological approaches to the study of public health.

3. State the main specific methodological approaches to the sociological study of health.

4. Give a definition of the class health gradient. Provide the main theoretical models explaining the class gradient.

5. How does education, financial position, job position affect health?

6. Give the definition of status incongruity (inconsistency). Describe its health effects.

7. Describe the health indicators of gender groups. What are the theoretical models explaining gender differences in health status?

8. Describe the impact of the family on the health of men and women. What are the reasons for the differences in this influence?

9. What are the main mechanisms of the influence of age on health? Show the relationship between the influence of social and biological factors on the aging process.

10. Describe the factors that affect the health of men and women throughout their life.

11. Describe the main mechanisms of action of stress of social changes on the health of the population and society.

CHAPTER IV. LIFESTYLE AS A MULTIDIMENSIONAL FACTOR IN HEALTH

Questions to consider:

1. Interaction of individual and social in lifestyle.
2. Psychological factors of health.
3. Modern civilization and physical culture.
4. Human health in the context of morality and law.

Basic concepts: human health, psychological factors of health, individual health, public health, physical culture.

4.1. INTERACTION OF THE INDIVIDUAL AND THE PUBLIC IN LIFESTYLE

The way of life of the people of each given society is an important characteristic of the level of historical development of culture and its features, therefore, a characteristic of the civilization to which it belongs.

The urgency of the problem of lifestyle as a factor of people's health in Russia is due to a reduction in life expectancy, an increase in morbidity among children due to insufficient care for their health in families, among pensioners due to difficulties in supplying them with effective medicines, the appearance of previously unknown avian flu and other life-threatening diseases, an increase in the number of disabled people from war and labor, as well as patients due to the use of drugs, alcohol. In addition, such negative aspects of modern life in Russia as the presence of unemployment in the country, poor nutrition due to a lack of income for material support, and unsatisfactory housing conditions due to the unresolved issue of this problem in the country, also affect people's health. Millions of people in the country suffer from violations of the temperature regime in their homes due to frequent failures of technical heating systems and a lack of energy capacity. In Russia and other countries, people are frightened by terror-

ism, which spreads fear for the safety of life, creates stress and thereby oppresses the human psyche, weakens his health. At the same time, people live, work, fall in love, women give birth to children. In the countryside, peasants produce grain, meat, milk; in cities, workers and engineers in factories and factories produce tractors, trains, airplanes, clothing, and food. Every morning the doors of higher educational institutions, schools, hospitals open, teachers teach children, doctors treat sick people. A peculiar life takes place in men's and women's monasteries, in churches and mosques, where people also pray for health. In the evenings, a modern person sits at the TV, watches and listens to what is happening in the country, in the world, perceiving events with satisfaction, joy, or, conversely, with indignation, fear.

All these diverse and contradictory manifestations of life, methods and forms of human activity in the aggregate are called a way of life. The concept of "lifestyle" has long been known in natural language as a certain order in accordance with which a person behaves, a way of activity, a direction of a person's thoughts. In the "Explanatory Dictionary of the Russian Language" D.N. Ushakov in the fifth version of the interpretation of the word “image” we read: “The order that characterizes the properties, warehouse, direction of something, character. Examples: "What is your lifestyle?" Griboyedov. "The secretary had a liberal, even radical mindset." L. Tolstoy.

Modern life is distinguished not only by order, but also by disorder, it is full of contradictions between the old and the new, prevailing stereotypes and previously unknown requirements. For the older, still working generation, as well as pensioners, the gravitation towards stability and peace is disturbed by new challenges and the acceleration of the pace of life. For the younger generation, the desire for freedom to choose a way of life, for independence, for the earliest release from parental care, a passion for consuming the achievements of civilization is limited by the lack or lack of experience and knowledge of life, as well as the means to fully satisfy the constantly growing material and spiritual needs. These and other features of the modern way of life, conditioned by the

entry of society into the post-industrial and information era of televisions and computers, the ongoing local conflicts in the activities of states, the era of general globalization require new and new, deeper and more comprehensive sociological, cultural, historical, psychological and philosophical research. lifestyle problems. An important aspect of this problem is the study of the characteristics of the impact of lifestyle on the health of a modern person in the socio-philosophical aspect.

The belonging of the concept of "way of life" to the categorical apparatus of social philosophy is known. It is also used in modern literature in sociology, medicine, the theory of public health and health care. In medicine, the influence of lifestyle on health has long been known, especially when it is associated with a profession, specialty, and working conditions.

Doctors know that among car drivers, for example, lower back disease is common; teachers, university professors, whose lifestyle is associated with a load on the vocal cords, often have throat diseases. Of course, customs and traditions of the people, worldview, social psychology, philosophy and religion play a certain role in the lifestyle as a factor of health.

In this study, we are interested in the question of the relationship between the socio-philosophical and medical content of the concept of "lifestyle" and the degree of its influence on individual and public health, considered in their countless and contradictory relationships. Philosophy begins where there is a connection between one object, one phenomenon or process with another and many others, one sphere of life with another, the connection of the whole and its constituent parts, internal and external, small, limited, single with the general, finite with the infinite, etc. .d. In the huge variety of specialized ways of life of individuals, individuals, their behavior, unique individual habits, in their purposeful or random actions, social philosophy is called upon and seeks to find the necessary, common, stable, natural, functioning in their interaction. At the same time, social philosophy should not go beyond the limits of concrete living reality, and even more so stop in the sphere of abstract transcendentality, "superhumanity"

of general philosophical definitions of reality ", as was inherent in philosophy in the Middle Ages and some other directions in the history of philosophy, but focus on to “understand, express and take into account the existence of human individuals as the most important characteristic of social life, as a fundamental condition of any philosophizing, consciously referring to its premises”.

In the socio-philosophical study of the way of life as a multidimensional factor of human health, a complex of factors, we consider them not as divorced from each other, but in their organic interaction. As a theoretical prerequisite, we first consider the main aspect of the problem under study — this is the interaction of the lifestyle of individuals with its characteristics and those processes that manifest themselves in the lifestyle of the whole society, nation, people, in short formulating — the interaction of the individual and the public in the way of life. For further philosophical reflections, it is necessary to outline the contours of the definition of the concept of "lifestyle".

In the socio-philosophical and sociological literature, they usually referred to the well-known remarks of K. Marx and F. Engels in their joint work "German Ideology" that the way of life is inextricably linked with the mode of production, that the mode of production is not only "the reproduction of the physical existence of individuals ", But" to an even greater extent it is a certain way of activity of these individuals, a certain type of their activity, their certain way of life." For us, there is no doubt that the mode of production as the nucleus of the socio-economic formation to a certain extent determines the way of life of people. The lifestyles of people of primitive communal, slave-owning, capitalist, socialist (known from the experience of the USSR and some other countries) differ in common features of the indicated socio-economic formations and, above all, methods of production and the corresponding social-group, hierarchical, stratification structures of the population, moral and legal norms of human life. There were and are common signs of the way of life of people, conditioned by a certain civilization and the corresponding level and characteristics of culture. It is clear that the ways of life of societies, for example, agricultural, on

the one hand, and industrial, on the other, differ significantly. In "German Ideology" K. Marx and F. Engels investigated the spiritual life of Germany, primarily ideological, in close connection with its history. A careful acquaintance with this socio-philosophical work shows that with a comparatively the same level of material culture and method of production, the way of life of the Germans differed from that of the French. There were differences between them in the historical paths of development and the related differences in political regimes. Germany, much later than France, entered the era of renewal of the social system, preserving conservatism, due to the fear of the French revolution of 1789–90. K. Marx and F. Engels investigated the features of the socio-economic, political and spiritual life of the then Germany, revealed the specifics of the political struggle of the then emerging social democratic parties in Germany. Differences in historical development, most likely, determined the peculiarities of the fate that the Germans and the French experienced, these two geographically and economically neighboring peoples belonging to the same civilization, during the Second World War.

It is impossible to ignore the differences in some remnants of the former historical features preserved in these countries, which are noticeable in the way of life of modern Germans and French.

In the lifestyles of peoples, nations, ethnic groups, there are features of the general and the special, which certainly have a certain impact on the worldview and psyche of the population. Probably, no one will deny, for example, the equally destructive effect of fascist, dictatorial, totalitarian regimes on the mental health of people, and a long-term mentally oppressed state, as you know, usually leads to a physical weakening of the body. With relatively similar or identical formations and civilizations, social structures and levels of development of neighboring societies, along with common features in their way of life, there are, as noted above, cultural and historical features.

A somewhat different picture is revealed if we look at the way of life, taking into account the professional, gender and age, family and household, eco-

nomic (in terms of the size of the income of families and individuals) differences in the life of people. And, finally, it must be admitted that, regardless of the presence of common and special features in the way of life of any given society, there are differences in the way of life of individuals. In any society, there are men and women endowed with a healthy genotype and the ability to work hard. At the same time, there are sick or poor health people, invalids of war and labor, who cannot afford to support their families in normal material well-being. There are young people leading a "riotous" (as the people say) lifestyle, belonging to a certain subculture. There are drug addicts and alcoholics. There are thieves and crooks, rapists and murderers. Each of this category of people is characterized by an individual lifestyle. It can be conducive to health or destructive.

There are many definitions of the concept of "lifestyle". According to Yu.P. Lisitsyn and N.V. Polunina, there are more than 40 of them. Summarizing them, the named authors note that “in general, a lifestyle is understood as a certain, historically conditioned type, type of life activity, a certain way of activity, activity of a person, a group of people, the population in the material and non-material (spiritual) spheres of human life. It should be borne in mind, — write the cited authors, — that this definition refers not to activity, activity in general, but to the totality of essential features of human activity. "

In the above definition of the concept of "lifestyle", which we study in order to clarify the degree of its impact on human health, or as a factor of health, our attention is drawn to the combination of the words "activity, activity", the essence of the interpretation by the cited authors of this combination of words (terms) becomes clear in the course of their further argumentation. "So," they write, "speaking about the way of life, first of all, one must bear in mind the organic connection of this concept with behavior in the broad sense of the word as an active, active principle, depending on the individual, subject and society."

The concepts of "activity", "activity", "behavior" are important for a more complete understanding of the content of the interaction of socio-philosophical

and medical approaches to the way of life. Philosophically, the concept of "activity" appears as an objective active state of living organisms, as the main condition for their existence. The concept of "activity" in social philosophy is not identical with the concept of "activity", it concretizes the activity of a person by purposefulness, conditioned by his vital and social needs. The behavior of an individual is not just activity, activity, it, moreover, is not always determined by the goal, in the mental plane it rather arises spontaneously under the influence of external stimuli and, only by orienting himself in the situation, the subject can turn to consciousness and find a goal. It is due to the indicated difference in the clarified concepts that the behavior in the life of different individuals, as well as the same individual in different situations, can be contradictory.

The concept of "inconsistency" in this socio-philosophical aspect of the study of human health clarifies the relative difference between the concepts of "multidimensionality" and "diversity". The diversity in the behavior of the subject indicates mainly the differences in the forms of its manifestation, while the multidimensionality indicates the possibility and reality of significant contradictions in its content. It is known, as it happens in life, that the behavior of a given individual steadily serves to maintain good health, another individual destroys it. It should be borne in mind that the behavior of this particular individual largely depends on the specifics of the nature of his psyche, worldview, but even more it is conditioned by the content of the situations to which he reacts, by the peculiarities of socialization.

Meanwhile, the behavior of the individual most often occupies a leading place in the structure of his lifestyle. It is especially clearly manifested in the medical activity of individuals in relation to their health, as it is quite rightly noted by Yu.P. Lisitsyn and N.V. Polunina.

In the socio-philosophical aspect, the way of life is a specific, integral characteristic of human being, as a unity of a specific variety of types and methods of life and multidimensionality of behavior of people, individuals and the population at certain historical stages of the functioning and development of so-

ciety. The way of life is formed, formed from the specific characteristics of all spheres of society's life — economic, social, political, spiritual. In objective reality, health as an attribute of a person's biosocial organization is an indissoluble unity of an integral system, simultaneously manifesting itself only in the active activity of individuals and social groups, carrying out this activity as a certain way of life, as a specific variety of economic, social, political and spiritual life.

The historical process of the formation of a healthy lifestyle, which concerns not only individuals, but also the whole society, includes professional, gender and age, family and household and other individual differences of people both in their attitude to health and in the specific state of health of each individual. General concern for health based on the purposeful formation of a healthy lifestyle is precisely what brings together the philosophical and medical approaches to the problem under study. This is common when viewed from a general philosophical view of the social being of a person in no way presupposes the forcible leveling of the individual and personal qualities of people, but, on the contrary, includes the noble goal of ensuring the humanistic self-realization of the individual in favor of preserving and strengthening the health of the nation, ethnos, people ... In the history of our society, they appear as an era when the activities of society were built without taking into account the self-realization of human individuals. The results of this attempt turned out to be not only ineffective, but also destructive, since they reinforced the alienation of the objective, social and personal aspects of activity. In theory, this alienation was expressed by various concepts of the connection between production and the human factor, practice and being of people, work and personal life, which actually ruptured the activities and personal self-realization of people ... In Western philosophy, similar ideas were developed by functionalism, which reduced people's behavior to the performance of given functions, and structuralism, who believed that any human activity "fits" into predetermined structures and only enlivens their action. Until the 70s. XX century. such ideas about activity seemed natural. But then, under the influence of post-industrial development and the

search for intense being, stereotypical ideas gradually began to give way to concepts of activity that have a clear social and humanitarian orientation, giving preference to multidimensional descriptions of activity. "

Multidimensionality and activity in the activities of people with the development and improvement of civilization become the most important sign of the way of life of people and can play an increasing role in increasing their medical activity and health culture.

The problem of lifestyle in the context of social medicine is scrupulously and deeply studied by Yu.P. Lisitsyn and N.V. Polunina. For the first time, they provided the most detailed social and health structure of a lifestyle that affects the health of the population. Having never used the term “multidimensionality” of the way of life, the named authors confirm it with a detailed listing of its structural components. *Among these components, they include four groups of various factors, indicating the degree of their impact (in percent) on the health of the population:* 1) socio-economic conditions and lifestyle factors, the share of the total impact of which exceeds 50% of all conditioning impacts on public health; 2) conditions and factors of the external environment, in the structure of which approximately 20–25% is accounted for by environmental pollution; 3) biological conditions and factors — approximately 10–15%; 4) conditions and factors of the health care system and services — 10–15%.

It is characteristic for us that the given ratio of the conditioning factors refers, as the researchers point out, "to both health and ill health." We fully support the concept of "ill health" along with "health" here. These concepts, we believe, represent opposite sides of the most generalized, socio-philosophical concept of "human health". As for the indicator of the total impact of these factors on health as a percentage, it is quite legitimate, but, in our opinion, it is insufficient in the socio-philosophical aspect. It should be borne in mind that low total indicators of the impact on health of "conditions and factors of the health care system and service" in comparison with "socio-economic conditions and lifestyle factors" in the everyday consciousness of people cause an underestimation

of medicine and health. The socio-philosophical aspect implies the impossibility of compensating the role of medicine and health care is no other health factor in the sense that it is impossible to replace a doctor treating a patient with a cook who prepares tasty, completely healthy food. Each factor, regardless of its overall health impact in percentages, has a specific role to play. The true role and practical significance of health factors is their cumulative, complex and, one might say, systemic impact on human health. This approach is legitimate in our socio-philosophical context of the study of the role of lifestyle, which requires considering its structure as a combination of all health factors, taking into account the activity and activities of individuals and the entire population in relation to their health, including medical activity. In this regard, we consider it important for socio-philosophical generalizations in the works of Yu.P. Lisitsyn and his colleagues that in the "ranking distribution of the main characteristics of the lifestyle on the health and ill health of the population" they include the "level of medical activity" first in terms of the degree of influence, dividing it according to two different characteristics: "high level" and "low level" of activity contributing to the formation of health or ill health of the population. This means that the cited researchers include the level of medical activity in the structure of lifestyle as a factor of health and ill health. At the same time, like the lifestyle itself, they divide medical activity "into various aspects or elements: sanitary (medical) literacy, hygienic and antihygienic habits, appeal to medical institutions for advice (including preventive ones), implementation of medical recommendations (including on prophylactic medical examination), participation in the protection of public health and in health care. In addition, according to the named researchers, medical activity can be characterized taking into account the regularity of nutrition, physical culture and sports, attitudes towards alcohol consumption, smoking, behavior in case of illness ... "The role of education and culture and the importance in this regard of timely treatment of pregnant women to the district doctor obstetrician-gynecologist for advice for preventive purpos-

es is confirmed by the fact that such medical activity "almost six times reduces the level of perinatal mortality."

Thus, we are talking not only about enhancing health-improving activities, but also concretizing the way of life as a factor of health. The multidimensionality and contradictory nature of the way of life, which determines both health and ill health, is confirmed.

As a result, we can give a generalized, socio-philosophical definition of the way of life of social subjects as a concrete, holistic, multidimensional manifestation of the ways and forms of their life in all spheres of society, conditioned by the experience of historical development, the level of culture and civilization, changing customs and traditions of the people ... A lifestyle, considered as an aggregate, complex, multidimensional phenomenon, including the interaction of both individual and social factors, in philosophical language — single and general, has a contradictory effect on human health, depending on the degree of activity of his health behavior, mental nature, worldview, personal culture.

4.2. PSYCHOLOGICAL FACTORS OF HEALTH

The concept of "psychological", as you know, comes from the science of psychology, the subject of which is the psyche, or the soul as the reality of the internal informational activity of a person, his brain, manifested in the behavior of the individual, in his reactions to internal and external stimuli, in his emotions and feelings, playing an essential role in the functioning of his lifestyle. In this regard, we distinguish between the concepts of "psychological health factors" and "mental health" depending on the context of thinking.

In the socio-philosophical aspect of the health of a modern person, the problem for research is the twofold effect of the psyche on health — preserving it and destroying it. We are interested not only in mental disorders in the medical aspect, which are dealt with in a special branch of medicine — psychiatry. Social philosophy is interested in the interaction of all lifestyle factors that heal

or destroy the psyche of a modern person and, in turn, themselves experience the opposite effect of the psyche on the lifestyle as a multi-dimensional factor of human health.

The World Health Organization's Policy Briefing on the Challenges of the World Health Organization's Global Strategy for Health for All in the 21st Century, under the heading “Specific health problems” under the heading “Target 6. Improving mental health,” states that “By 2020, psychosocial the condition of people and the availability of comprehensive services that will help people with mental health problems ”. In Russia, we read in the specified source, in the second half of the 90s, about 6 million people (42 out of every 1000 population) used the services of psychiatrists ... The main parameters of mental health have changed over the past 30 years. The reported prevalence of mental disorders in Russia has almost quadrupled. Against this background, the frequency of hospitalization of the population for mental illness increased 2.5 times, disability — 2.5 times ... The nosological appearance of the contingent has undergone significant changes. The number of patients with psychoses increased 1.5 times, non-psychotic disorders — 3.1 times, mental retardation — 3.8 times, alcoholism — 8.7 times. Thus, if in 1965 the nosological portrait of an average psychiatric patient was determined by severe psychotic disorders, then after 30 years — alcoholism ... Comparative analysis of the registered levels of population seeking psychiatric care indicates a significant underreporting (5 times) of mental disorders in the population. Thus, the reported prevalence of mental disorders in Russia only gives an idea of the tip of the iceberg. "

From the detailed statistical data of the aforementioned "Analytical Brief ..." WHO shows that it deals mainly with mental disorders as a subject of psychiatry. In the socio-philosophical plane, we are investigating not only and not so much psychiatry as the place of psychological factors in the lifestyle of a modern person as a multidimensional factor of health.

The human psyche is a diverse and multidimensional phenomenon, and the science of it, psychology, consists of numerous branches. Suffice it to say

that even a short psychological dictionary published in 1998 includes 1162 articles, including 170 personalities of domestic and foreign scientists. From the variety of psychological phenomena, processes, laws, as factors of health, we choose only what, in our opinion, is most relevant today, in the era of post-industrial civilization.

We choose two aspects of the research as the subject of the socio-philosophical aspect of the study: the first is the essence of the psyche itself as the inner information world of a person, which arises in the process of his interaction with the outside world; and the second side is the results of the influence of the external world on this internal world in the aspect of lifestyle as a multidimensional factor in the health of a modern person.

The information world in the human psyche is represented (according to Freud) by its three parts: the unconscious part, mainly by instincts; conscious, accessible to introspection and being a source of volitional regulation of behavior; superconscious, composed mainly of social influences and attitudes. In its specific structure, the human mental world is manifested in thoughts, feelings, sensations, perception, memory, experiences, representations, mental acts, motivations and desires, etc.

In the socio-philosophical aspect of our subject of research, it makes sense to try to approach the concept of "mental health". In psychology, it is considered as an integrative characteristic of the full value of the psychological functioning of the individual. Understanding the nature and mechanisms of maintenance, disturbance, restoration of mental health is closely associated "with a general idea of the personality and the mechanisms of its development."

In this definition, mental health is attracted by its proximity to our socio-philosophical definition of health. We approach health as a concrete, holistic, multidimensional, contradictory state of a person's biosocial organization. Of course, the integrity of an organism presupposes an integral characteristic of the functioning of its constituent parts. Maintenance, disturbances, recovery presuppose the contradictory nature of health, in this research subject — psychological

health as a structural part of the general health of a person. At the same time, we point out the need to concretize the integrity of the mental state of the organism, its health (which organ is sick or healthy, which disease affects it, etc., psychologically — which of the properties of the psyche is preserved or affected.

A deep and comprehensive disclosure of the characteristics of mental health and the factors that determine its usefulness or impairment is impossible without their general philosophical and socio-philosophical characteristics. And the most relevant in this aspect, the prerequisite for the study of the chosen subject for us is the ratio of the physical (bodily) and mental in the human body.

It is known that a long-term depressed state of the psyche can harm physical health, and this latter depressing the psyche even more. Here the role of the interaction of mental and physical health is clearly manifested. In addition, the psyche itself, as already noted, is a complex subsystem of the biosocial organization of a person, and the violation of one or some of its elements immediately affects the well-being of the psyche itself as a whole.

The most difficult for the release of the role of the psyche on the state of health is the interaction of human mental activity and neurophysiology, or physiology of the brain. We proceed from the recognition that mental processes are determined by neurophysiological processes, and the peculiarities of the mental reactions of an individual in his behavior are determined by his genotype, his genetic program, which is directly introduced from birth into his neurophysiological system and is involved in its activity.

The genotype as a biological structure affects the physiology of the brain, and the brain — on the psyche of the individual and through it on his behavior, the activity or passivity of which plays a leading role in his lifestyle. Both the genotype and the psyche of the human individual by themselves, directly in the material form, may not appear, they are preserved in his inner experiences, while unknown to others (relatives, friends). They turn into information in the behavior of an individual when he comes to the doctor and reports on his feelings and well-being, thereby showing his activity or passivity in relation to his

health. It is in behavior that the connection of the human psyche and mental health with a way of life is revealed, the degree of influence of which on health is assessed by physicians-sociologists as the determining factor in the structure of human health factors. However, for the philosophy of medicine, this relationship is not unidirectional and absolute. Congenital disorders in the genotype of a given individual can only harm the functions of certain parts of the brain, and these latter, which are in a state of organic interaction with other parts of the brain, can expand and deepen the disturbances in the activity of the brain as a whole, or, conversely, stop the onset of the pathological process. It all depends on the nature and degree of certain violations. The fact is that before us is the activity of a complex biosocial system, which, as a system, has a mechanism for regulating psychophysiological processes in the human body.

In the context of mental health, it is appropriate here to draw attention to the statements of A.S. Batueva. The problem of the relationship between "physiological and mental, biological and social in human nature was at the forefront of the socio-historical development of mankind, and this or that solution served as an ideological and political weapon in the struggle of the new with the old, in solving a number of problems of education, training, organization of labor. and health ".

In addition to what was said by A.S. Batuev, for the subject of our research it is important to additionally cite the following statements: “The main task of I.P. Pavlov was the desire to understand the physiological basis of human mental activity and its regularities. The objective method of conditioned reflexes proposed by him was considered as the most important tool with which one can create the foundation of psychological knowledge. Along with this, mental processes are closely related, but irreducible to them ... The psyche is understood as the property of a highly organized brain to recreate an internal image of reality, which is perceived as something separate from the subject. The psyche is information that makes up the content of organized brain processes. " If the brain processes are organized, systemic, then the information that makes up their con-

tent also takes on the property of being organized, systematic. Our definition of human health, given by us at the beginning of the study, is confirmed, in which information processes, along with others, occupy a stable place as factors that determine a specific holistic state of a person's biosocial organization, that is, his health.

The above detailed arguments in combination with the statements of prominent scientists on the problems of the psyche and psychophysiology of a person open the way not only to the problems of behavior and lifestyle as a multidimensional factor in the health of a modern person. At the same time, they make it possible to substantiate the dual nature of man and his health, which contains the unity of the biological and the social. Biological, neurophysiological, bodily in a person and social, manifested in his psyche, consciousness and behavior, in work, in material and spiritual creativity, in all his life activity, in his way of life, are inseparable, organically interconnected. In man, psychosocial and spiritual are inextricably linked with biological. As for the specifics of the human psyche, its diversity and multidimensionality of manifestation, they are determined by the process of life with all its signs and properties. The multidimensionality of life determines the multidimensionality of the psyche. The informational nature of the psyche, as well as of consciousness, is a kind of bridge between the biological and the social in life, since information is inherent in all properties of life. The peculiarity of the human psyche also lies in the fact that, on the one hand, it is conditioned by internal neurophysiological processes, on the other hand, by the influence of the external social and natural environment. The above arguments simultaneously concern the interdependence of the individual and the public in human health. In the process of communication, in the conditions of the collective nature of people's life, the psyche of many individuals is melted into a social, social psychology, which can be benevolent, express universal agreement or stressful, indignant with riots, socio-economic crisis, suppressed, conflict, etc. ...

Based on the above arguments, one can try to answer the question of what protects the mental health of a modern person, what destroys, what are the factors protecting and destroying it.

In a generalized form, of course, both of these factors are due to the way of life, in which above we tried to discover the deep determinations of the way of life itself. The same thing happens in the psyche, because it itself acts as an organic part of both the individual and the social way of life, which is formed under the influence of internal and external determinations.

The ennobling and protecting mental health and life of the individual and society consists primarily in a healthy genetic inheritance, in a healthy neurophysiological structure of individuals and the entire biosocial organization of a person. The humanistic worldview of the optimistic direction of individuals and society is also a health-improving factor. It is impossible to ignore the necessary scientific biological, medical and ideological knowledge concerning the preservation of health, not forgetting, of course, the problem of the meaning of life.

Drug addiction, alcohol addiction, tobacco smoking are becoming more and more dangerous for the mental and physical health of young people, which are turning into stable habits in the lifestyle of young people. This requires an offensive struggle by the entire society against these bad habits. Medicine alone does not have time. In recent years, the number of people who use drugs has increased by 1.5 times, which has led to an increase in the number of sexually transmitted diseases, hepatitis and AIDS.

Socio-philosophical study of the problem of lifestyle as a factor of health cannot bypass such an important aspect of human life as eros, which occupies a biologically and socially determined place. The pleasures of modern civilization are shaking the moral foundations of society, primarily among young people who are notable for their inexperience in life and curiosity about eroticism. The latter (erotica), directly related to the sexual feeling and psyche, literally overwhelms movies and advertisements. E.V. Chernosvitov writes that “Any manipulation of sexual feelings is fraught with the most unexpected consequences. Sex

cannot be a simple entertainment: even “mechanical” sexual satisfaction captures the deepest layers of the psyche in a person: those related to life and death. The most immediate consequence of sexuality manipulation is illness (either physical, that is, conversion, or mental). " Long-term consequences — a progressive decline in the quality of life, up to pseudodement behavior "(from the Latin" dementia " — insanity, dementia. This means pathological deceit while preserving memory. — Iv.).

EV Chernosvitov believes that “the only instance that is capable of controlling the erotic side of the life of society is social medicine. Only social medicine can investigate and stop such terrible phenomena for public health as perversions (perversions — Iv.) (Pedophilia, necrophilia, speed, sexual psychopathy). Clinical medicine and penitentiary sociology, which involuntarily make perversions as their "objects", cannot do anything about them. It is impossible for a normal person to understand a perverse subject. " At the same time, the cited author cites the statements of C. Lombroso.

The Italian forensic psychiatrist and criminologist Cesare Lombroso (1835–1909), the founder of the anthropological direction (Lombrosianism) in criminology and criminal law, as you know, “put forward a provision on the existence of a special type of person predisposed to committing crimes due to certain biological characteristics (anthropological stigmata) ... The modern version of Lombrosianism is characterized by various biosocial theories of crime, whose representatives, considering biological factors to be determining, recognize the influence of the social microenvironment ”. In modern Russia, crime sometimes takes on a brutal appearance. On TV, one of the group of young people involved in beating the first innocent people they came across to death said that he, kicking the fallen victim, "did not understand what he was doing at that time."

Crime, whatever the reasons it may have, undermines a healthy lifestyle, creates in society a sense of danger to life, anxiety and stress.

Stress in modern society is the most common negative factor in human psychological health. In psychology, stress is called "a nonspecific response, a

functional state of tension, reactivity of the body that occurs in humans and animals in response to stressors — significant in strength under the action of extreme or pathological stimuli for the human or animal organism."

The Canadian pathologist Hans Selye (1907–82) called stress nonspecific. Stress in his concept arises in the process of difficult adaptation of the individual to the conditions of existence, his body reacts "to any demand presented to him." It is known from the practice of communicating with such people that they are so insecure about the stability of their conditions of existence that they are overwhelmed by anxiety for their social security and stability. And for such uncertainty, there must be extreme or pathological stimuli, which are called "stressors" in psychology. In modern conditions in Russia, common stressors (in the socio-philosophical language, we propose to call them "stress factors") are considered participation in hostilities, violent attacks on a person (sexual or physical violence, robbery, group assault), abduction of people, mainly children , with the aim of extorting ransom, being held hostage, terrorist attacks, torture, being held in concentration camps as prisoners of war, all sorts of disasters, situations when a person is diagnosed with an incurable, life-threatening disease, etc. ... These stress factors are understandable especially for Russians who have experienced and are still experiencing similar stresses due to their recurrence. Of course, stress can be accompanied by an internal psychological weakness of the individual himself. In accordance with the laws of social psychology, stress can cover the masses of the population if they are not eliminated for various reasons.

The deep reasons for the emergence and persistence of stress factors in the modern world are the transitional nature of the era experienced by all mankind, the ongoing local wars due to geopolitical differences or claims of states to each other, world terrorism, the growth of crime, corruption, the rise in the cost of living; the contradiction between the hopes of people to improve their lives thanks to the potential capabilities of the post-industrial, informational civilization, on the one hand, and the not coming real improvement of life, on the other.

Stress factors and risks of psychological health of people persist in specific countries, where poverty, unemployment, fierce competition for a place in society give rise to mutual enmity and hatred between individuals, envy, greed in the possession of power over other people, property. The overcoming, elimination of these and similar negative phenomena and processes is hindered by the action of the historically preserved law of uneven economic development of countries. In this regard, each specific country has its own difficulties in solving socio-economic, political, spiritual problems, including health problems.

The family has a known effect on mental health. Both the composition and size of the family, and the relationship between husband and wife, father and mother of children, to a great extent determine their way of life. As a social institution, the modern family is in crisis. The classical monogamous family is undergoing qualitative changes towards an increase in the frequency of divorces and the growth of "fatherlessness" of children. The reasons are manifold. The main one is the expansion of women's independence from material dependence on men with a low gender culture. This is especially true in developed countries and in Russia. Husband and wife often get divorced due to sexual disharmony. Divorces are frequent due to the inconsistency of mental differences between spouses. Families are widespread, where there is no correspondence in the worldview and value orientations of the spouses. The traditional monogamous family persists for two reasons: love shared by both spouses or poverty. It is clear that in Russia, in conditions of low material incomes of families alone, it is difficult for parents to feed their children and themselves.

In a happy family, the mental health of both spouses and children is many times higher than in unhappy families. Convincing evidence of this was given in his famous novels by the great Russian writer Leo Tolstoy.

The growth in the number of happy families in our time is also constrained by the ongoing local wars in the world that claim the lives of men of reproductive age, in most cases leaving their brides or wives without healthy grooms and husbands.

The socio-psychological factor that negatively affects the formation of happy families in modern Russia is unemployment among both men and women in the countryside and women in cities. This reason can be explained by the increase in prostitution in cities. In search of work and happiness, young women travel to foreign countries and there they become victims of the widespread trafficking in the female body in modern society.

Analyzing the social position of women in the modern world in the context of psychological factors of health, one cannot ignore the problem of abortion. Neither medicine nor the state can solve this world-historical problem so far. The complexity of this problem lies in the irresistible mutual gravitation of the sexes of all living things in general, caused by one of the objective properties of life — reproduction. Interaction in the socio-psychological plane here is the indicated attraction, on the one hand, and the demand of humanism to protect a woman from suffering and the inevitable birth control in one, separately taken family, on the other. Biologically, a woman during her reproductive age can give birth to eight or more children, but in socio-economic terms she cannot feed and raise them. The factor regulating the birth rate, taking into account the level of culture and socio-economic conditions achieved at the given period of development of society, may be precisely the scientifically grounded demographic policy of the state and the subjective will and culture of the spouses.

In China, as you know, the population has exceeded one billion two hundred million, in India — more than nine hundred million. In order to regulate population growth in China, maternity allowance is paid for only two children. This, to some extent, constrains excess population growth. We in no way regard such a demographic policy as an endorsement of the teachings of the English economist T.R. Malthus (1766–1834), the founder of Malthusianism, according to which the rate of population growth significantly exceeds the rate of increase in the production of means of subsistence. Their ratio, as is known, in the original formulation of Malthus was derived from a comparison of geometric and arithmetic progressions. The fact is that the experience of developed countries

confirms the presence of a tendency to restrain excessive population growth as the general culture of society develops. An example is the Czech Republic and other culturally developed countries.

Mental stress in the minds of people arises in situations of conflict. Conflicts in society arise and are accompanied not only by the stability or instability of the psyche of the individuals involved in the conflict, it can be oppressed by socio-economic and political factors. But in all conflicts, the human psyche plays a big role. Human history is full of conflicts. These are the uprisings of slaves in slave-owning societies, peasant riots in the Middle Ages, the class struggle of workers in the revolutions of the new era. These are conflicts between criminals, on the one hand, and the state in defense of law and order, on the other. These are conflicts between competitors over the distribution and ownership of natural and social wealth and property in all societies and at all times of history. These are interpersonal conflicts in the family, collective about prestige, dignity, satisfaction of slander, insult, etc. This is a struggle for power within society. These are interreligious and interstate wars in the past and in the present.

The main question for social philosophy and psychology today is — is it possible to prevent conflicts? Major authorities in psychology N.V. Grishina, G.M. Andreeva and others believe it is possible. Dialogue, negotiations, cooperation, and mutual assistance are becoming effective means of settling conflicts in modern human society, in social groups, in the family, at school.

In modern society, in the aspect of the psychological factor of human health, control of consciousness and methods of suppression of personality become relevant for research. This inhuman phenomenon in modern society is characterized by the activities of destructive cults — groups and organizations that use psychological and spiritual (and any other: medical, commercial, political, etc.) ignorance and inexperience of many people. These groups "purposefully, seeking illegal enrichment and illegal power, deceive them and tie them to themselves, in every possible way causing, maintaining and strengthening the

state of ignorance, ignorance and forming unnatural, illegal states of dependence among their adherents." The leaders of destructive religious sects instill in their flock their supposedly divinity and superhuman strength.

Hazards to the mental health of people can be hidden control and manipulation of a person.

A person may not know and not understand that they are being manipulated in other people's personal or any group interests, but he may instinctively feel psychological exploitation. Then it creates feelings of discontent and anxiety, which is harmful to health. A particular danger to the mass of the population, its mental health is posed by the latent control of a person in the sphere of ideology and propaganda, carried out by dictatorial and totalitarian and socio-political regimes.

The danger to the psychological health of the individual and groups of the population is represented by international terrorism, which penetrates into the inner life of peoples. Its worldview and ideological sources are various branches of extremism as ideology and practice.

Another very stable source of it is the complexity of the relationship between two world civilizations — the West and the East. Their interactions undoubtedly have an impact on the psychology, worldview of the peoples of Russia, especially taking into account its specificity, that it is a kind of fusion of European and Asian cultures and values of these two civilizations.

In the aspect of psychological factors in their connection with religious and philosophical factors of human health, the psyche of the patient is complex. He especially needs the sympathy and care of relatives, the whole society and a doctor. From the doctor is required sensitivity, strict adherence to the treatment of the patient with the Hippocratic oath. At the same time, it is important to take into account that the disease in the psychological and world outlook usually reminds a person of the vulnerability of the body and its health, the short life span, and its mortality.

The richest potential of human mental health is possessed by memory and consciousness as the highest level of its reflecting and programming informational activity. In the socio-philosophical aspect of the study, the memory and consciousness of an individual as factors of his inner world can destroy a person's mental health if they focus only on failures, incorrigible, already made in the past, mistakes, thoughts that life has failed or really failed, which is typical for an individual in moments of hard thinking, reflections. Thanks to the action in the consciousness of society of the laws of social psychology, such a psychological phenomenon also penetrates into the mental health of the population.

Memory, functioning in the sphere of consciousness under his control, can contribute to the preservation of health and, if it is disturbed, its restoration, if the individual by willpower suppresses the memories that destroy health and focuses only on successes, the joys of life that he had experienced in the past or are expected in the present. and the future. Of course, at the same time, social philosophy does not ignore, but asserts the enormous potential of the external natural and socio-cultural environment of the individual, both negative and positive, in relation to human mental health, as noted above in this work.

The connection of memory as a psychological phenomenon with consciousness, or rather, its transition into the sphere of consciousness, is that it organizes, stores and reproduces information about a person's past experience and periodically accompanies his social activity not only in the form of everyday or scientific thinking, but also in objective — sensual images. The study of the figurative, objective-sensory nature of memory is the prerogative of not only art, but also ethics and aesthetics as sections of social philosophy. It is known that in art, behavior and all manifestations in the way of life of people and their assessments exist in the object-sensual forms of the beautiful and ugly, sublime and base, tragic and comic. In the socio-philosophical and aesthetic context of human mental health, these forms suggest the so-called catharsis, interpreted in philosophy, aesthetics and psychology as overcoming suffering, cleansing the soul from painful experiences. In real life, the phenomenon of catharsis is used

in medicine in order to alleviate the suffering of patients. Songs, for example, as you know, in the life of any individual, both healthy and sick, cleanse the soul, heal it. In physiological terms, this is due to the beneficial effect on the living body of sound waves that are beneficial to it. And for a person, music is a source of mental recovery.

A person, reflecting on his life, mentally running through events or penetrating in detail into their content and the subtlest manifestations of emotional experiences in the past, usually finds in him both good for himself and unsuccessful, and supporting his mental health, and weakening, hurting. Thus, he seems to be living a second life. This is its qualitative difference from any developed animals.

From the experience a person can voluntarily choose an experience useful for his health, use it as psychotherapy. Of the various types of memory — motor (motor), emotional, figurative, verbal-logical, studied by psychology, the last three types are important for the socio-philosophical analysis of human mental health. It is known that some diseases nosologically arise and persist as a result of a constantly depressed state of the psyche in individuals prone to painful reactions to stressors. Doctors find such a diagnosis or see it in some forms of bronchial asthma and cancerous tumors. The indicated psychological type of people is most suitable for psychotherapy by means of object-sensory memories and subsequent or accompanying logical, moreover, philosophical reflections. The most important means of mental recovery with the help of memory, in addition to positive shifts in socio-economic, political, cultural and historical spheres, should insistently introduce folk and classical art into the way of life, without pursuing, figuratively speaking, not very pleasant shouts about modern love " stars "stage. Folk, patriotic civil songs, romances, folk dances have always been and can become effective remedies for folk and individual memory.

In a subtle, touching attitude to music, to other forms of art, the human psyche is revealed more fully, deeper. In art, she finds a kindred, truly human, as a child finds in a mother. To something generic, the psyche also gravitates to

communication with other people, communication with those close in spirit, outlook, interests. Such communication heals the soul, gives strength to life.

The great Russian poet M.Yu. Lermontov in his famous poem "The Demon" showed the attractive power of man with a tremendous depth of art. Having received immortality and immeasurable strength of spirit from the gods, he contracted evil and began to do evil. But evil bored him too. Flying from the skies over the peaks of the Caucasus, descending to the green valleys, he saw the sakli and heard the voice of a woman. She sang sadly, alone. The demon was drawn to her, to the man. Human! This is what and who is most attractive of all, all that the Demon saw in the depths of the universe. In the woman's voice, the Demon recalled childhood, his ancestral, human trait.

It is in the psyche that both the creative and life-destroying forces of a person are concentrated. Human civilization is called upon to do everything possible to save the human psyche from destruction.

In conclusion, on philosophical reflections on the mental health of a person and his research, we consider to recognize that the main factor in the stability of the psyche and its creative potential is creative work for the personal benefit and the benefit of one's homeland.

4.3. MODERN CIVILIZATION AND PHYSICAL CULTURE

In this case, we consider physical culture as a constituent element of a lifestyle as a multidimensional factor of human health living in a modern, post-industrial, informational civilization.

Physical culture, which includes sports in its structure, is an organic component of the general culture. The concept of culture unites all social, material, spiritual means of life created by a person in the course of history, constituting its structural elements as a system. Social means in this definition of culture include labor and the forms of its organization and, accordingly, the culture of work; social institutions: state and law, citizenship, economics, politics, science,

education, health care. This also includes physical culture, the structure of which is determined by the structure, as a matrix, of general culture. Within the framework of civilization, it manifests its historical level and features of development, generated by the specific historical conditions of people's life: socio-economic, political, ethnic, as well as natural-climatic, continental, etc. These conditions contribute to the formation of the specifics of the worldview, worldview, world outlook, religion and philosophy. In the social and humanitarian sciences, it is recognized that these conditions largely contributed to the formation of not only the unique properties of the cultures of peoples, societies, but also determined the levels of their historical development, their belonging to a particular civilization, certain features of their way of life.

In the socio-philosophical aspect, it is important to emphasize that the prerequisite for the emergence of physical culture is labor, human interaction with nature, obtaining food by hunting, cattle breeding, agriculture, which required not only physical and mental health, but also dexterity, knowledge of the bodily organization of a person and the role of physical exercise. and, as a consequence, the relative separation of special exercises from purposeful labor for the production of livelihoods.

Sport within the framework of physical culture arises at the dawn of civilization from a universal human property — competition, an eternal desire to take the lead in competition with rivals. In modern conditions, physical culture and sports in the historical consciousness and way of life of peoples are a generally recognized social institution. As for the specifics of sport in the conditions of modern civilization, for a part of the population it acts as a health-improving factor in the form of leisure, recreation, entertainment; for a small social group, it is a profession, daily work in the form of professional sports.

Social philosophy studies the problems of physical culture and sports in general methodological terms. In this regard, there is a need to determine the initial principle of their research. It is known that the formation principle of the study of history dominated monopoly in the methodology of science until the

end of the twentieth century. At the end of the twentieth century, social philosophy in collaboration with other social and humanitarian sciences, in addition to the formational principle of studying social processes, substantiated the civilizational principle. The concept of "civilization" is richer than the concept of "socio-economic formation", it includes the formation as a concrete historical stage in the development of civilization.

Thus, a new cultural paradigm emerged. In this regard, we consider physical culture and sports in the aspect of civilization. In the conditions of modern civilization, they become multifunctional, capable of penetrating into all spheres of society, including the sphere of lifestyle.

It is not by chance that the modern civilization that came in history behind the agricultural and industrial civilization is called informational. The invention and development of television, computers, cell phones and other means of communication have opened up unprecedented opportunities for humanity to receive, store, process information and use it. The created information technologies make it possible to widely use them in all spheres of society, including in the field of physical culture and sports. First of all, they facilitate the work of orienting young people and the masses of the population to physical culture and sports as a historically recognized value in society in the structure of a healthy lifestyle.

Physical culture and sports in the methodological terms concretize the concept of "lifestyle", the socio-philosophical definition of which we gave above. The leading researchers of the studied phenomenon point to the inextricable connection between physical culture and sports with the way of life. Is not it. Lubysheva in her fundamental work "Sociology of Physical Culture and Sports" concretizes the studied phenomenon in terms of "lifestyle", "lifestyle", "standard of living", "quality of life", especially emphasizes the role of "healthy lifestyle". “A healthy way of life,” she writes, “is, first of all, a cultural way of life, civilized, humanistic. “A healthy mind - in a healthy body”, health care as the highest value are the main categories that determine the content of this phe-

nomenon ". L.I. Lubysheva rightfully connects the modern way of life in Russia with the economic, political and, as a result, social crisis. He characterizes the lifestyle of people in a crisis of society as a way of survival, and cites as evidence such objective factors as "an increase in the share of family labor (as a rule, everyone works in the family, even children, students, pensioners); the size of the work load is at the level of the physiological limit (they work at 2–3 rates); especially the rural population suffers, where they have to work on their own farmstead.

"The basics of a healthy lifestyle. Physical culture in ensuring health " — this is how Professor Y.I. Evseev. NV Reshetnikov and Y.L Kislitsyn in their joint work "Physical culture" associate the concept of health with the reserves of the human body and the way of life.

The culture of human bodily existence is complex, diverse and multidimensional.

L.I. Lubysheva, taking into account the diversity of socially and culturally formed parameters of human being within the framework of physical culture, distinguishes the culture of movements, the culture of physique and the culture of physical health. At the same time, the function of physical culture includes upbringing, education of a person, preparation of young people for work, and defense of the fatherland. In addition, he emphasizes that physical education is of economic importance, it contributes to the preservation and strengthening of people's health, reducing the incidence of sickness among workers, and increasing their labor productivity.

In the conditions of modern civilization, great opportunities open up for the promotion of physical culture and sports in order to strengthen ties with foreign countries. The use of computer and television technology gives impetus to the transition from technical means of communication between peoples to live communication. Thanks to television, the masses of the population become direct witnesses of the life of the peoples of other countries, their attitude to various social values, including physical culture and sports. Watching international

sports competitions by millions of TV viewers prepares the minds of the masses for cooperation between nations and peoples in the field of physical culture and sports, and then in general cultural, scientific, technical, and economic spheres.

Information technology and technology open up wide opportunities in the study of the deep secrets of the human body and, accordingly, in a more scientific substantiation of mass physical culture and health-improving activities and programs of physical education and preparation of young people for work and life. This is not only about possible new discoveries of the biosocial nature of man. Through the efforts of medicine, biology, human anatomy and physiology, biotechnology, scientific and technical, socio-hygienic, medical-prophylactic and other health-improving recommendations have been developed for overcoming occupational diseases, facilitating the motor functions of the body of disabled people, etc. New, in addition to the already known, scientific and technical discoveries in the field of informatics, as well as social and economic advances in the humanities in Russian society inspire hope for people to create, while absent or insufficient, real conditions for the introduction of scientific discoveries into social practice, into a way of life. ... In the field of physical culture and sports, we mean the lack of equipped sports grounds, stadiums, and water pools.

Physical culture and sports have existed in people's lifestyles and have served to promote health for tens of thousands of years. In the socio-historical consciousness, they have long been accepted as a phenomenon of the general culture of people and recognized as a social institution. And in modern conditions they do not lose their significance as cultural values. At the same time, the level of civilization, along with a powerful progressive intensification of social relations, simultaneously brings a person new difficulties. First of all, the pace of life is growing, thanks to modern transport, social space is shrinking, social time is compressed, it flows faster. People are in a hurry, running, so as not to waste time. Mental and intellectual stress increases. Physical culture can reduce this stress. Meanwhile, physical culture and sports as a means of health promo-

tion in Russia are currently engaged in "only 8–10% of the population." In this regard, children and young people need special attention, among whom the number of those referred to a special medical group is growing. Modern medicine has created a completely effective system of physiotherapy exercises, experimentally substantiated scientific concepts of rehabilitation of diseases, assistance to disabled people, etc. ... However, its achievements are poorly supported by the material and technical base and financial sources. However, its achievements are poorly supported by the material and technical base and financial sources. The modern sphere of physical culture and sports as a social institution cannot function as a factor of people's health without an appropriate material and technical base and personnel of special training for the physical education of young people, special health services for the adult population, pensioners.

The importance of professionally applied physical training of people is growing. This concerns, first of all, the retraining of specialists from the remaining traditional professions that require a combination of certain physical forces and skills, for example, the profession of a geologist, pilot, drivers of cars, ships, cosmonauts, soldiers and officers of the military service, specialists in water professions (seafarers, hydrologists) and others; it is also related to the development of new professions and specialties associated primarily with information technology, which also require appropriate physical and psychological health in the face of the disappearance of obsolete professions and specialties. Thus, modern civilization places in front of society, in front of a set of states, in front of each individual, ever-increasing requirements for physical, mental, intellectual, educational training. Physical culture and sports should become an integral part of the lifestyle of every citizen, all children, all boys and girls.

Social philosophy is also interested in the axiological side of physical culture, i.e. treating it as a value. The first value side of it is, of course, health improvement, preserving and strengthening human health, his life. Only good health gives fullness to life. A person knows that he is mortal, but does not agree to die today: let him be given at least a little more time to finish his affairs in this

world. This is the most controversial and complex problem for both biological, medical, and social sciences and humanities. And for social philosophy, the problem of the value of human health and life is one of the main ones.

Since the Renaissance, human life has been recognized as an absolute value. Famous German philosopher Immanuel Kant (1724–1804) put "the duty of a person to take care of the preservation of his life and health" in the first place in his life. Another German philosopher Arthur Schopenhauer (1788–1860) wrote that "nine-tenths of the happiness of our life is based on health ...".

During the twentieth century, the meaning of life has changed. This was facilitated by two world wars, in which tens of millions of people died. The scientific and technological revolution of the twentieth century also greatly influenced the understanding of the value of life; it opened up unprecedented opportunities for humanity to receive, store, process information and use it in the interests of man. In conditions when the interaction of social space and social time has changed, a quality life is recognized as a special value. The modern level of civilization brings new difficulties to man. one). In the time of Karl Marx, the amount of information doubled every 50 years, and in the 20th century — every 20 months. Social space is thus compressed, and social time flows faster. Human labor activity becomes more static. The proportion of physical stress in it decreases and the proportion of mental and intellectual stress increases. All this does not contribute to the strengthening of human health.

The value is the very activity of a person. As the substance of the social, conscious activity, both physical and mental, is aimed at transforming the surrounding reality to meet the vital needs of a person, including the need for body movements. Life is impossible without them. It is physical culture that has this potential.

Physical education helps to consolidate healthy body movements, develop immunity, increase resistance to stress, body resistance to harmful environmental influences, and, consequently, improve human health.

Understanding the value of physical culture changes the attitude towards this sphere of life in society. Physical culture is acquiring a new meaning, it should become a way to maintain physical activity, improve health and maintain the quality of life. Life today is recognized as the main value of society.

The aesthetic side of the bodily organization of a person also belongs to the value characteristics of human health. Aesthetics is a traditional branch of philosophy that studies the laws of subject-sensory perception by a person of the forms of the phenomena around him, processes using such categories as the beautiful and the ugly, the sublime and the base, the tragic and the comic. In other words, aesthetics sees the content and essence of things through their forms. Physical culture and sports in aesthetic terms are able to ennoble the human body and his body movements through scientifically based exercises, proper nutrition, and a healthy lifestyle. It is clear that overeating inherent in some individuals can disfigure his body shape, and a certain diet can help. Modern medicine and everyday practice know the means for losing weight, with the exception of fake ones, which are produced by fraudsters. What can be said, for example, about such facts, as reported, at the Sheremetyevo airport in Moscow, passengers from Thailand were detained, who brought 70 thousand diet pills to Russia, which turned out to be fake and dangerous to health. Of course, it is wrong to say that fraud is inherent only in modern civilization, in the context of which we study physical culture as a means of aesthetic refinement of the body and body movements of a modern person.

The complexity of the philosophical problem here lies in the possibilities of overcoming the contradictions between the physical and spiritual beauty of a person. We are talking about hundreds of thousands and millions of crippled men, who were left by unceasing local wars without arms, legs, etc., who were awaited by their brides and wives, children and parents since the war. In this aspect, for the socio-philosophical study of human health, the unconditional significance as a methodological principle is the dual, biosocial nature of man. Modern medicine and technology, as creative manifestations of its social nature, are

forced to invent and produce prostheses not only to replace rotten or broken teeth, but also arms, legs, curvature of the spine, etc. At the same time, physical culture and sports in collaboration with orthopedics (a specialized section of medicine) are able to smooth out the physical defects of the human body by means of aesthetically designed teeth, corsets, prostheses, as was observed in their time for the fate of the famous Alexei Petrovich Maresiev (born 1916), Hero of the Soviet Union (1943), Colonel (1978), Candidate of Historical Sciences (1956). During the Great Patriotic War, fighting as part of fighter aircraft, he shot down four enemy aircraft. He was hit and for 18 days a seriously wounded man reached his troops. After amputating his legs, he mastered prostheses and shot down seven more planes. The feat of Maresyev is described in the book by BN Polevoy "The Story of a Real Man". The will to live, intellectual beauty and harmony, the feeling and perception of oneself as a person help to be and become beautiful. As an ennobling (according to Freud, "sublimation") cooperation of physical and spiritual beauty, physical culture and art, one can cite the vital activity of the famous Madonna (stage name; real name and surname Madonna Louise Veronica Ciccione (b. 1958), American pop singer, dancer, film actress In appearance, in visual perception, she is an ordinary woman, but in dance she turns into a goddess of beauty. And around us, especially in Russia, hundreds and thousands of women, men, thanks to intellectual beauty and physical culture, cooperation with medicine and art, become and are perceived as beautiful, in the language of aesthetics, as beautiful.

Summing up the above philosophical reflections, reflections on human beauty in the aspect of physical culture and sports as factors of health and beauty, we can summarize that physical culture and sports are capable of forming human beauty as values, if each individual in his lifestyle harmoniously combines physical education and sports with medical, hygienic, artistic and intellectual culture. The aesthetic aspect of physical culture and sports is another side of the deep biosocial nature of the human personality.

It seems to us that a socio-philosophical study of physical culture and sports in the complex of a healthy lifestyle cannot get around the problem of physical education and training of teachers and trainers for this area. First of all, we need a scientifically grounded program that adequately reflects the biosocial, psychological, and pedagogical aspects of this problem. Social philosophy is called upon to provide a general methodological basis.

The social and humanitarian aspect of training physical culture specialists presupposes knowledge not only of the positive prospects for the development of post-industrial civilization, but also of its weak and negative aspects. Modern civilization is not yet able to fully protect a person from natural disasters, man-made disasters, social conflicts. In this regard, studies of sports as a model of human activity in extreme conditions are becoming relevant.

The unexpectedly powerful floods in the summer of 2002 in Russia and in Western Europe showed that the population in such cases especially lacks technical means of protection. Even in the presence of improvised means, skillful use of them requires a certain physical and special training. It is no coincidence that an emergency service has been created in Russia, as in developed countries. The social and humanitarian training of students and the entire population cannot bypass the problem of world terrorism. The difficulty in overcoming it in practice lies in the fact that in the implementation of their sinister plans, terrorists with knowledge use the latest information technology and highly effective military weapons. This implies the need for mandatory inclusion in the training program of specialists and its social and humanitarian justification for training in martial arts, military applied arts, training of snipers, special-purpose masters for the army and internal affairs bodies, and the skills and abilities of forced behavior of the civilian population in extreme conditions.

In the socio-philosophical aspect, the development of physical culture and sports are inextricably linked with the peculiarities of civilization. In modern society, the integration of peoples in solving socio-economic, political, moral and other complex, global problems associated with the problem of human life and

health becomes an objective necessity. Among them are such as the fight against cancer, HIV infection, drug addiction, alcoholism, drug trafficking. In sports of the highest achievements, the negative aspects of modern civilization are manifested in the excessive commercialization of sports.

In the psychological and pedagogical support of humanization of training of specialists in physical culture and sports, it seems to us, the problem of interaction between pedagogy and psychology is being raised. Modern civilization in the issue of the educational function of physical culture and sports cannot but recognize the relevance of the ideal of a harmoniously developed person. We believe that, along with physical perfection, physical education and sports have a positive effect on the spiritual sphere of a person, and spiritual wealth, in turn, is able to constantly push a person's guidelines for the constant development of his physical potential and the transformation of his useful activity into a game of physical and spiritual forces.

4.4. HUMAN HEALTH IN THE CONTEXT OF MORALITY AND LAW

Morality, as you know, is the subject of ethics — an important section of philosophy, especially in its social orientation towards man. Morality is capable and called upon to regulate relations between people in all spheres of life, in the way of their life, based on their understanding of good and evil, relying not on physical, material-economic or some kind of external force, not on coercion, but on voluntary, conscious the decision of the individual, personality. In this respect, morality is inherent only in man, is formed in his inner spiritual world and in real life is manifested in his way of behavior in relation to himself, to his own health, and also to the health of other people.

In the context of morality, which occupies an important place in the structure of a way of life as a multidimensional factor of human health, the epistemological sequence of categories, it seems to us, starts from the paired category

"good and evil", followed by ethics as a theoretical expression of morality, morality as realized in behavior specific living people norms and commandments.

Good and evil are concepts that categorically express one of the most fundamental philosophical problems. The author of these lines, based on medical practice, defines the concept of "good" as a process and result of the creation and preservation of life, and evil as its destruction by man. However, it should be borne in mind that, speaking about the fundamental nature of the category of "good and evil", modern philosophy rightly indicates the uncertainty, the impossibility of their complete definition.

In the religious beliefs of believers, for example, natural disasters are considered evil, inherent in the foundation of the universe itself and acting in the image of the enemy of God, and God as the embodiment of good, wisdom. It is no coincidence that a request for good health addressed to God is present in the prayers of believers of any religion. Consequently, the problem of good and evil in the mind of a person can go beyond the limits of their own ethical concepts. Not only in interfaith disagreements and wars, even in wars of a geopolitical, interstate nature, in which the life and health of people are destroyed, the concepts of good and evil are often intertwined, and each opposite side of the conflict tries to interpret these concepts in their own interests. Taking into account the real personal and social relations of people in the field of health confirms the legitimacy of an approach to the problem of good and evil from the standpoint of living practice, namely, recognition of the concept of good, as we suggest, the creation of life, and the concept of evil — the destruction of life.

Morality seeks to consolidate people's concern for their health as the highest value in the form of moral principles, norms, commandments. Society has long known the commandments "do not kill", "do not do to another that which you do not wish for yourself." The famous "Oath of Hippocrates", a code of health protection attributed to the ancient Greek physician, the largest representative of ancient medicine, Hippocrates (c. 460 — c. 370 BC), who, in addition to describing and treating a number of human diseases, high moral character

and a model of ethical behavior of a doctor. In medical universities, it has become a practice for their graduates to take the Doctor's Oath.

Historical experience confirms that morality as a strong spiritual principle in the way of life of people can be clearly manifested in their behavior, primarily in the practice of health healers. Both in the past and in our time, the absolute majority of doctors and nurses have devoted their entire way of life to difficult, noble and humanistic activities to restore people's health and are faithful to the spirit of the "Doctor's Oath". Many doctors, along with clinical, medical practice, are engaged in scientific activities. As a result of the introduction of their scientific discoveries into medical practice, thousands and thousands of patients of medical institutions, resorts, sanatoriums are cured. Modern medicine is on the verge of finding a number of previously difficult to cure human diseases.

At the same time, as is known from TV programs about real events taking place in the world, as well as in Russia, in the field of medical workers there are facts of corruption, unfair treatment of patients, as well as other violations of medical deontology. Considering these facts in the context of the systemic activities of health care, as the socio-philosophical approach to human health implies, it is important to draw the attention of society and the state to the need for comprehensive care of the health of the nation, the introduction of moral values and behavior into the lifestyle of not only doctors and nurses, all medical professionals, but also each individual and the entire population.

The introduction of a healthy lifestyle into the customs and beliefs of people, into the behavior of each individual depends not only on morality. Due to the versatility and multidimensionality of a person's social life, the complexity and inconsistency of his psyche, taking into account the level of the general culture of each individual individually, moral requirements in a real way of life are not fully fulfilled and not by every individual. In this regard, moral requirements need support from the law. In the socio-philosophical aspect, these reasons are the concretization of a more general principle of supporting morality by legal norms.

On the legal regulation of the sphere of public health protection in the literature of recent years, it should be noted that there are no such in the socio-philosophical aspect. At the same time, the available literature serves as concrete, factual, empirical material for socio-philosophical reflections. Among the publications of recent years, the works of E.V. Ushakov, V.I.Akopov, G.R.Kolokolov, N.V. Kosolapova, O.V. Nikulnikova, A.V. Datiy, S.V. Alekseev and others stand out.

E.V. Ushakov examines in detail the system of medical care and its participants in the form of a popular presentation of laws and regulations in medicine. He expresses very productive thoughts and ideas on the problems of the moral culture of medical care, respect for the patient, the connection between the training of doctors and the ideological goals of the state and its ruling elite.

V.I. Akopov created a voluminous practical guide for lawyers and doctors in the aspect of forensic medicine, devoted mainly to forensic medical examination and practical recommendations.

G.R. Kolokolov, N.V. Kosolapova, O.V. Nikulnikova developed a course of lectures on the basics of medical law, in which they consider in detail the organizational and legal foundations of the functioning of modern health care, the legal characteristics of relations arising in the provision of medical care, the rights of the patient and legal basis for their provision, legal responsibility for violations of patient rights, procedural means of protecting the rights of patients, features of the arbitration court, the rights of medical workers, methods and means of protecting the rights of medical workers, legal regulation of certain types of medical activities. The authors consider the main legal definitions based on the state will, expressed "in the system of generally binding norms aimed at regulating universal relations and ensured in their implementation by the coercive force of the state."

S.V. Alekseev in the textbook "Sports Law of Russia" created by him considers it in the context of the legislative regulation of physical culture and sports as a complex and specific socio-economic system, i.e. as a special branch

of law. The textbook A.V. Datiya is distinguished by the rich practical experience of forensic medicine and psychiatry.

We consider the problem of health in the context of law with the task of determining the place of law in regulating the way of life of people as a multidimensional factor of human health. We believe that this problem should be investigated based on the philosophy of law.

In the aspect of philosophy of law, the need for legal regulation of people's behavior, their way of life is due to the objective nature of the role of orderliness, organization, structuredness of society and social life of people. These properties are inherent in the deepest nature of human biosocial organization. In the above reflections on the biosocial nature of a person, the position was substantiated that in the human body, in the complex of the properties of his life, there is enough disruption in the arrangement of genes in the chromosome of an individual or in metabolism in the cells of one or another organ, how destructive processes can begin and spread throughout the body generally. And the whole organism acts as a biosocial system for the restoration of order. In philosophical terms, this is a synergistic law of self-organization of the system. The laws of synergetics, which study the processes of self-organization of systems, are also inherent in human society.

Violations of the orderliness of the social life of people can cause in society massive violations of the usual order necessary for its normal life. Such phenomena are known in historical practice and are reflected in social psychology, in the theory of the psychology of conflict.

Violations of public order, in the language of social philosophy — the ordering of the system include crimes that threaten and destroy human health, deliberate or accidental (inadvertently) murder, terrorism, local and interstate wars. At the same time, in all civilized countries, law and laws, by virtue of their social nature, continue to take their place in the way of life of peoples and nations.

Since we study the life and health of people in the socio-philosophical aspect, the legal provision of health, respectively, should be considered in the con-

text of the philosophy of law. The first thing that is quite observable in the way of life of people with respect to law is the observance of the laws of the state, which contain permissions and prohibitions in the economic, political, social life of people, in all spheres of society. In this regard, it is understandable that there is a huge variety and plurality of laws, subordinate legal acts (presidential decrees, government decrees and other government bodies) that make up the whole hierarchy of the legal system. But social philosophy is interested in the general that is hidden behind these phenomena. It turns out that behind the variety of laws and other legal norms lies the very law, which should not be confused with its many manifestations. The philosophy of law sees the differences between law and law. Law introduces state will into society in order to protect orderliness as a deep, essential, systemic property of society. And the law, as a phenomenon of law, concretizes those aspects of social life, the way of life of people and the industrial, educational, health care, research teams, families, etc., which require their protection and strengthening at each given concrete historical stage of the development of society ...

As one of the authorities in the philosophy of law, academician V.S. Nersesyants, notes, there is a variety of definitions and the unity of the concept of "law". Defining a person as a legal entity in the context of the ontology of law, he indicates that the ontology of law is a doctrine (concept) about law in its distinction with law. The existence of law (its objective nature and its own essence) is represented in the principle of formal equality of people, freedom and justice for them in their public life.

The vector of human movement, writes V.S. Nersesyants, is directly opposite to what a person has always strived for — freedom, right, equality, justice from a situation of their absence; and we would add — or their lack, depending on the specific historical level of development of civilization. The deep essence of laws as phenomena lies in the law, namely in the demand and establishment of equality, freedom and justice in the political, economic, social and other spheres of society in the sense of creating equal conditions for each human indi-

vidual to express himself, his abilities. In fact, people from birth are not equal in anthropological, physical, genetic, mental relations, including their state of health. But from the point of view of the philosophy of law, all people as citizens of the state are endowed with equal rights, which means that they are recognized as people, as human beings, and in this respect have equal rights to live and work to the best of their real abilities. However, in the history of mankind, legal equality was recognized in varying degrees of completeness, although a person as a person from birth has a natural right to life, health, work, prosperity, happiness. It is known from history that according to Athenian and Roman law, a slave (all people who were in a state of slavery) was not legally recognized as a person, although he is a person from birth and has a natural right to be a bearer, i.e. the subject of law. In this sense, human rights are “the recognition of the legal capacity and legal personality of a person. And by the volume of legal capacity and the range of subjects of law in different eras, one can judge which of the people and to what extent this system of law recognizes as a person who has rights. "

The study of the health of a modern person in the context of morality and law leads to the idea of the category of "human essence", which is usually often operated not only in social philosophy, but also in anthropology, sociology, cultural studies, political science, social psychology, pedagogy and other social humanities. We believe that the fundamental category of social philosophy is the concept of "man". The essence of man is in his difference from animals, namely in his generic characteristics. The generic characteristics of a person are labor, collectivity, consciousness. The concept of "social essence" of a person concretizes the concept of "man" from the point of view of his level of humanization, socialization, general cultural development of human society, its belonging to a particular socio-economic formation, to the levels of civilization, to a particular social group, the level of assimilation by him moral and legal norms and values in society.

In the context of the philosophy of law, there is a need to pay attention to the concept of "human and civil rights". The concept of "citizen" refers to a person as a member of the state, it complements the broader concept of "person" from the point of view of the history of human rights as the history of "humanizing people, the history of the progressive expansion of legal recognition as a human of certain people for a particular circle of relations." This position is confirmed by historical experience. The rights and freedoms of man and citizen, proclaimed in the French Declaration of 1789, were of well-known worldwide importance. In the conditions of the twentieth century. 1948 Universal Declaration of Human Rights, European Convention for the Protection of Human Rights and Fundamental Freedoms (1950), International Covenant on Economic, Social and Cultural Rights (1966), International Covenant on Civil and Political Rights (1966), Optional Protocol to the International Covenant on Civil and Political Rights (1966), "Final Act" of the 1975 Helsinki Meeting, "Concluding Document of the Vienna Meeting of Representatives of the States Parties to the Conference on Security and Cooperation in Europe" 1989. This long list of international documents on the rights and human freedoms, in which human rights to the safety of life are among the first proclaimed, is of fundamental importance for the protection of human rights and freedoms in modern conditions and their scientific, legal and socio-philosophical understanding in the context of the legal provision of citizens' health protection. The documents of international health organizations serve the same purposes.

In 1979, the United Nations (UN) adopted the "Convention on the Elimination of All Forms of Discrimination Against Women." The convention has been ratified by Russia. In 1979, the UN created the Safe Motherhood Convention, it is a set of socio-economic, legal and medical measures that contribute to the birth of desired children at optimal age periods without negative impact on women's health, providing a combination of motherhood, domestic responsibilities and work. In 1946, the World Health Organization was created as an international intergovernmental organization, a specialized agency of the United Na-

tions, based in Geneva. Its statutory tasks define the fight against especially dangerous diseases, the development of international sanitary rules, the improvement of the sanitary state of the external environment, the reform of health care, etc. At 1.1. In 1997, 182 states, including Russia, were members of WHO. All documents adopted by WHO since its establishment are based on the most important principles of its statutory activities. Among these principles are the recognition of the fundamental rights of every person to the "highest attainable standard of health", "the responsibility of governments for the health of their peoples", etc.

In 1973, the World Health Organization put forward the idea of "primary health care", which was understood as "the zone of first contact between a person (family, community) and national health systems", as their "integral part", "main function" and "focal point". The concept was discussed in detail at the International Conference of WHO and UNICEF in Almaty (September 6-12, 1978) with the participation of delegations from 134 countries and representatives of 67 international organizations. As a result, the Alma-Ata Declaration and 22 recommendations were adopted. The Declaration proclaimed that the most important task of governments, international organizations and the entire world community is "the achievement of all the peoples of the world to such a level of health that will allow them to lead socially and economically productive way of life", and that the main tool for this is the development of national health systems, the main function, central link and integral part of which is primary health care. In the recommendations, these provisions were expanded in more detail.

At present, the World Health Declaration under the slogan “Health for All” in the 21st century has been declared by the WHO program of activities. The “Health for All” target was confirmed by the 51st World Health Assembly, which laid the corresponding report (A51 / 5) as the basis for the development of future policies for WHO and countries. In the World Health Declaration, adopted on 16 May 1998, the Assembly solemnly reaffirmed its commitment to the

principle that the enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being and that with regard to health, all have equal rights, equal duties and equal responsibilities. "

The listed documents of international health organizations express the will of the United Nations, acting on behalf of the peoples, as well as the will of governments. In this respect, they contain the essential properties of law, in the context of which we consider the problem of human health.

We have presented the ideas of the Declarations on the health of peoples and nations. Unfortunately, real life turns out to be more complicated and contradictory.

We must agree that people and the peoples they form have not all completed "the genesis of their political and legal nature, have not reached the heights of that political and legal communication, which in modern language is called the rule of law, the rule of law, the rights and freedoms of man and citizen" ... In this regard, it is interesting to cite the famous words of the French philosopher, writer, and lawyer of the VIII century from his work "On the Spirit of Laws", where he wrote: "There is no word that would receive so many different meanings and make such a different impression on minds as the word" freedom". Some call freedom an easy opportunity to overthrow someone who has been endowed with tyrannical power; others — the right to choose who they are to obey; still others — the right to bear arms and commit violence; fourths see it in the privilege of being ruled by a person of their nationality and obeying their own laws. For a long time, a certain people took freedom for the custom of wearing a long beard. Others combine this name with a well-known form of government, excluding everything else. "

These are the words of the great thinker, each of which has not lost its meaning even today, in the era of post-industrial civilization, when civil society and the rule of law are proclaimed in the constitutions of most states. When not only has not yet been put an end to world terrorism, killing hundreds and thousands of innocent people, crippling their health, regardless of any moral stand-

ards and human and civil rights. The same can be said about the aggravation of the general criminal situation in society and a specific criminal situation, when a person has no one to turn to for help and has to rely only on himself and urgently make a decision that does not contradict law and law.

Investigating the problem of health in the context of morality and law within the framework of their place in the way of life of people and society, we will try to connect the concepts of law and law with modern Russian legislation on the protection of citizens' health. At the same time, we proceed from the fact that any health care law should be legal, and not arbitrary, established only by the subjective understanding of the legislator. We fully admit that to achieve an accurate, adequate reflection in the law on the protection of the health of citizens, as in any other law, the real, objective needs of society in specific laws is not a simple matter, but a complex and difficult one. The law is accepted by living people with their subjective views, worldview, value orientations, level of knowledge of the subject of the law.

In the context of our study of the factors of the health of a modern person, laws on the protection of the health of citizens should proceed from the concept of a concrete-integral state of a person's biosocial organization as a manifestation of the unity of all the properties of life. To take into account all internal (organismic) and external (natural and social) factors of influence on the human body, taking into account the characteristics of modern, post-industrial civilization.

With regard to the legal support for the protection of the health of citizens, here it is necessary to emphasize the role of the most important principle of such provision — the guarantee of their implementation in life. The history of society knows that it is possible to adopt the necessary laws, to proclaim all human rights in them, but in reality they, as it happens, "hang in the air", remain on paper or are not fully implemented, as it is written in the law.

The concept of "good" is one of the most important categories of the philosophy of law. It concretizes the universal human rights to equality, freedom

and justice. The right to health care is certainly a blessing for the individual. The good for each of the individuals who make up the population of a given country is a common good. This is how it is understood in a legal state. Health as a blessing in a state governed by the rule of law is recorded in its main Law — the Constitution.

In the Constitution of the Russian Federation, the official date of adoption of which is December 12, 1993 (amendments to the Constitution of July 1, 2020), Article 38 says: "Motherhood and childhood, the family are under the protection of the state." Article 41 recognizes the right of everyone to “health protection and medical care. Medical care in state and municipal health care institutions is provided to citizens free of charge at the expense of the corresponding budget, insurance premiums, and other receipts.

In the Russian Federation, federal programs for the protection and promotion of public health are financed, measures are being taken to develop state, municipal, private health systems, activities that promote human health, the development of physical culture and sports, environmental and sanitary-epidemiological well-being are encouraged. Concealment by officials of facts and circumstances that pose a threat to the life and health of people entails liability in accordance with federal law.

Article 42 recognizes that everyone has the right to a favorable environment, reliable information about its condition and to compensation for damage caused to his health or property by an environmental offense ”.

As you can see, the constitutional declarations on the protection of the health of citizens of the Russian Federation are distinguished by their versatility and concreteness, which fully confirms our socio-philosophical definition of human health as a concrete, holistic, multidimensional, contradictory state of his biosocial organization. The principle of a concrete, holistic and multidimensional approach to the health of a citizen is also confirmed by the laws adopted in the implementation of constitutional provisions. So, the "Fundamentals of the legis-

lation of the Russian Federation on the protection of public health" contains 69 articles.

To check the correctness, socio-philosophical validity of the above reasoning about the relationship and interaction of law and law, let us turn to the first and second articles of the first section of the “Fundamentals of the legislation of the Russian Federation on the protection of public health” (hereinafter — Fundamentals ... — Iv.). In the first article of the Fundamentals, we read: “Protection of the health of citizens is a set of measures of a political, economic, legal, social, cultural, scientific, medical, sanitary-hygienic and anti-epidemic nature, aimed at preserving and strengthening the physical and mental health of each person, maintaining his long-term active life, providing him with medical assistance in case of loss of health.

The following are recognized as the basic principles of protecting the health of citizens: 1) observance of human and civil rights in the field of health protection and ensuring the state guarantees associated with these rights; 2) the priority of preventive measures in the field of public health protection; 3) the availability of medical and social assistance; 4) social security of citizens in case of loss of health; 5) the responsibility of state authorities and local self-government bodies, enterprises, institutions and organizations, regardless of the form of ownership, officials for ensuring the rights of citizens in the field of health protection (as amended by Federal Law No. 122-FZ dated August 22, 2004 , entered into force on January 1, 2005) ”.

So, in the given "General Provisions" of the Fundamentals, each provision, each principle contains the basic requirements of the law to the observance of human and civil rights in the field of health protection. The law is not supplanted, but, on the contrary, there is law as the basis of the law. This provision in the context of the philosophy of law on the interaction of law and law should underlie each of the 69 articles of the Fundamentals of Legislation on the Protection of Citizens' Health and every law in general. This is so, since it corresponds to the articles of the Constitution and follows from them. In this case, the

Constitution acts as the guarantor of human and civil rights and freedoms and therefore is the “Basic Law” of the state.

The first conclusion from the socio-philosophical analysis of morality and law is the recognition of them as the most important elements of the structure of the way of life of people as a multidimensional factor of human health.

Due to the fact that in modern society the first and fundamental embodiment of law is the Constitution as the basic law, and its concretization is the Fundamentals of Legislation on the Protection of Citizens' Health, to substantiate the following conclusion about the role of law in solving the problem under study, we once again draw attention to article Fundamentals. The first article says that health protection is a set of measures of political, economic, legal, social, cultural, scientific, medical, etc. character, i.e. we are talking about responsibility for the health of not only the citizens themselves, but also the state. This is specifically written down in Article 5, which defines the powers of federal bodies of state power, bodies of state power of the constituent entities of the Russian Federation and bodies of local self-government in the field of health protection.

The activity of the state in the socio-philosophical aspect represents the unity of objective and subjective factors in the management of society, since society itself transfers the powers of management to the state. It is clear that the fate of the country, including the well-being of the life and health of the nation, largely depends on the level of rationality of programs for the political, economic, social, and cultural development of society.

If the activities of society, including the problem of managing the affairs of human health based on the Constitution of the proclaimed rule of law and the construction of civil society, represent the unity of objective and subjective factors, then which of them prevails today or should prevail? Of course, social philosophy and its concept of management are based on the unity of these factors, taken in their interaction. At the same time, it seems to us that the subjective factor lags behind all the time in the indicated interaction, it is too tied to the idea of

the primacy of the objective laws of social development, and the ideas of the thinkers of the past are insufficiently studied and not sufficiently comprehended.

The second conclusion from the analysis of health in the context of morality and law and the role of management in this aspect is that the subjective factor of the development of society, including the activities of the state and scientific elite to program the further development of society, in the modern concrete historical conditions of Russia and world development should be enriched a comprehensive scientific search for ways to develop society. In a complex, multidimensional historical process, society is periodically presented with a choice of paths.

4.5. SELF-TEST QUESTIONS AND EXERCISES

1. Describe health care as a social institution.

2. What is the basis of health-preserving behavior in the family? What are the consequences of low socio-hygienic literacy in the family.

3. How does the modern education system contribute to the formation of social attitudes towards health care among children and adolescents?

4. Comment on the thesis "Population health acts as a resource of labor."

5. What are the main trends in the development of national health care in the world?

6. Study the WHO World Health Report 2010. What are the main health problems in the world and ways to solve them?

7. What challenges do you think the Russian healthcare system will face in 2021–2025?

CONCLUSION

The study of the health factors of a modern person on the principles of the civilizational approach in the socio-philosophical aspect reveals the regularity of the organic relationship and the unity of the individual and the public in it. The interaction and unity of the individual and the public in human health is a concrete and holistic manifestation of the generic character of a person — the collective nature of labor and the unity of ontogeny and phylogeny of a person in his evolution. This regularity manifests itself in all aspects of socio-philosophical research — ontological, epistemological, value, ethical, aesthetic.

In the epistemological plan, on the subject of human life and health, the cognitive functions of the philosophical category "interaction", its connection with such fundamental categories as the existence of nature and man (society), universal connection and development, determinations, the material unity of life on Earth, self-organization biological and biosocial matter. The property of self-organization is the first, fundamental property of all living things, including humans.

All the properties of life are manifested in human health — self-organization, structuredness in an individual organism, consistency, metabolism, excitability as a reaction to information coming from internal and external influences, various forms of movement, growth, reproduction, adaptability to environmental conditions. Their unity is natural. It is enough to violate at least one of the properties of life, as in the body, its health can begin irreversible destructive processes. This proves not only the multidimensionality, the unity of the properties of life, but also their inconsistency, vulnerability, susceptibility to disease.

The fundamental position in the study of the properties of human life, which qualitatively distinguishes him from animals, is his inherent consciousness. Consciousness, thinking give the natural and biological properties of a per-

son the power of sociality, transform them into the power of reason, science and technology, creative labor.

An organism is characterized by relative autonomy and, at the same time, life in a population, together with other organisms similar to itself, involvement in the life of a population, a collective. Life outside the population, for a person — outside the collective (society) is impossible. This fundamental regularity of the organization of human life, like all life on Earth, determines the unity of his individual and public health and the unity of the individual and public in human health.

The concept of "individual health" means the state of health of a particular living individual. The concept of "public health" is an indicator of the state of health of a society as a result of generalizing the health indicators of a set of individuals. In this sense, such a public health indicator as life expectancy is not suitable for characterizing the health of an individual. Each real individual has its own life span. In this regard, the study of human health in the socio-philosophical aspect reveals the difference between the concept of "individual and public health" from the concept of "individual and public in human health". These concepts are related, but not identical. Before us is not just a correlation of linguistic elements, but semantic differences and interconnections of concepts. Public in human health is the state of health of an individual as a result of the impact of society on the health of an individual, a complex process of how socio-economic, political, health care, socio-psychological, technogenic and other cultural and historical factors of modern civilization exert certain other, favorable or unfavorable, destructive or healing effects on the health of an individual.

In the ontological plan of the study of human health, it becomes clear that the biological and social nature of the organization of his life is twofold, which makes it possible to combine these two aspects of life into one concept — the concept of “biosocial organization of man”. This concept also includes the unity

of the individual and public in human health and the unity of individual and public health.

The socio-philosophical approach to health allows us to reveal the specifics of the interconvertibility of matter and energy in the biosocial system, the interaction of information flows in ensuring life, the vitality of man and society.

Health manifests itself not only versatility, deep concreteness of the organism and its life, but also its integrity as a subject of socio-philosophical research.

The study reveals the cognitive richness of the concept of "state" as one of the important philosophical categories, reflecting the structural and functional connections and relationships of an extremely wide range of objects and phenomena in nature and society and the effectiveness of its use for the study of philosophical problems of human health. As a result of the study of various states of a person's biosocial organization, taking into account the modern conditions of his life, a socio-philosophical, extremely broad definition of the concept of "human health" was given. Human health is a concrete, holistic, multidimensional, contradictory state of his biosocial organization as a unity of all the properties of life, caused by the interaction of internal and external factors of life and the corresponding structural — functional, material — energy, information processes at every moment and stage of biological (genetic), ecological and cultural-historical development both in ontogeny and in phylogeny. This definition can serve as a starting point and a program for further research into the problem of human health.

The socio-philosophical concept of "vital activity" of a person includes all other concepts used to define the category of "health" by medicine and various scientific directions spun off from it.

Health certainly presupposes the vitality of the organism as its potential, in philosophical language — as the possibility of transforming it into reality, as becoming being, if only for this, all the necessary conditions are genetically in-

herent in the body and created in society, which are genetic, ecological, cultural and historical factors.

Social philosophy certainly presupposes the worldview aspect of a person's attitude to life and health, his deep reflections on the short duration of life, the mystery of death and the associated choice of biosocial behavior, lifestyle, etc. In order to find answers, it is legitimate to rely not only on the philosophical categories themselves, but also on natural-scientific concepts, the search for new categories reflecting the properties of the biosocial nature of man. As a new category epistemologically justified is the concept of "the period of progressive and sustainable development of life" in a healthy organism. During this period of a healthy individual's life (before the onset of old age or death from disease), an active production of energy occurs in his body as an open system at a level exceeding the level of entropy. After the period of progressive and sustainable development of life, there comes a period of decrepitude of the organism and weakening of the energy of life.

The continuation of the life of a human race, in contrast to the life of an individual, in the context of the category of “life activity of the genus” in its depth is due to the fact that as a result of the interaction of male and female principles, the vital energy of the child's parents becomes an impetus for the development of a new generation of biosocial life. The law of conservation of energy in a biosocial system is due to its qualitative specificity — the law of interconversion of types of energy: mechanical, physical, chemical, biochemical, biological and social and socio-spiritual as a result of their interaction.

In this regard, the conclusion is also confirmed that the connection and interaction of natural science with philosophy in the study of the problem of human health factors is becoming the most important need in modern society.

The solution of these test tasks forms the following competencies: UK–1, UK–1.2, UK–4, UK–4.1, UK–4.2, UK–5, UK–5.1, UK–5.2, OPK–4, OPK–4.2.

TEST TASKS

Instructions for tests 1–100.

For each test, select one or more correct answers, where a space — complete.

1. DEFINITION OF HEALTH ACCORDING TO THE WORLD HEALTH ORGANIZATION (WHO)

1) Health is an integral multidimensional dynamic state (including its positive and negative indicators), which develops ... in a specific social and ecological environment and allows a person ... to carry out his biological and social functions
2) Health is a harmonious unity of biological and social qualities due to innate and acquired biological and social influences (disease is a violation of this unity); a state that allows you to lead a life that is not constrained in your freedom, to fully fulfill the functions characteristic of a person (primarily labor), to lead a healthy lifestyle, that is, to experience mental, physical and social well-being
3) Health is a state of complete physical, spiritual and social well-being, and not just the absence of disease and physical defects
4) Health is one of the most important components of human happiness and one of the leading conditions for successful social and economic development

2. INDICATORS OF PUBLIC HEALTH

1) Demographic indicators
2) Indicators of morbidity
3) Indicators of physical development
4) Sociological

3. HEALTH COMPONENTS

1) Physical health
2) Mental health
3) Social health
4) Moral health

4. PHYSICAL HEALTH IS

1) The state of growth and development of organs and systems of the body, the basis of which are morphological and functional reserves that provide adaptive reactions
2) The state of the organism, which determines the ability of a person to contact with society
3) The state is determined by both biological and social needs, as well as the possibilities of meeting these needs
4) The state of the mental sphere, which is based on the status of general mental comfort, an adequate behavioral response (medical definition)

5. COMPONENT OF HEALTH, WHICH DETERMINES A PERSON'S ABILITY TO COMMUNICATE WITH SOCIETY

1) Physical health
2) Mental health
3) Social health
4) Moral health

6. A CATEGORY CHARACTERIZING THE QUALITATIVE ASPECT OF SATISFYING THE MATERIAL AND CULTURAL NEEDS OF PEOPLE BY COMPARING THEM WITH THE LEVEL OR STANDARD OF LIFE (SATISFACTION WITH WORK, QUALITY OF FOOD, MEDICAL CARE, ETC.)

1) Lifestyle
2) Quality of life
3) The standard of living
4) Way of life

7. THE VALEOLOGICAL PERSONALITY TYPE, CHARACTERIZED BY A HIGH LEVEL OF RESPONSIBILITY AND A HIGH LEVEL OF ACTIVITY IN RELATION TO ONE'S HEALTH

1) Self-regulatory type
2) Supporting type
3) Manipulative type
4) Deficient type

8. THE VALEOLOGICAL PERSONALITY TYPE, CHARACTERIZED BY A HIGH LEVEL OF RESPONSIBILITY FOR ONE'S HEALTH, BUT A LOW LEVEL OF BEHAVIORAL ACTIVITY TO ENSURE AND MAINTAIN HEALTH

1) Self-regulatory type
2) Supporting type
3) Manipulative type
4) Deficient type

9. THE VALEOLOGICAL PERSONALITY TYPE, CHARACTERIZED BY A HIGH LEVEL OF ACTIVITY IN RESTORING ONE'S HEALTH, BUT A LOW LEVEL OF SELF-RESPONSIBILITY FOR MAINTAINING IT

1) Self-regulatory type
2) Supporting type
3) Manipulative type
4) Deficient type

10. THE VALEOLOGICAL TYPE OF PERSONALITY, CHARACTERIZED BY THE FACT THAT IT FULLY ASSIGNS RESPONSIBILITY FOR HEALTH TO EXTERNAL FACTORS, SHOWING PASSIVITY IN ENSURING AND MAINTAINING ONE'S HEALTH

1) Self-regulatory type
2) Supporting type
3) Manipulative type
4) Deficient type

11. A COMPLETE BREAK WITH ONE'S CLASS (ONE'S STRATUM) AND THE TRANSITION TO LIFE “OUTSIDE OF SOCIETY” IS CALLED

1. Social adaptation.
2. Social mobility.
3. Depersonification.
4. Declassing.

12. WITHIN THE FRAMEWORK OF THIS DIRECTION, A PERSON IS A SOCIAL BEING, HIS DEVELOPMENT IS ENTIRELY DETERMINED BY SOCIETY

1) Biological approach to the essence of man
2) The modern understanding of the biosocial essence of man
3) The Marxist-Leninist teaching about man
4) Sociocultural approach to the consideration of the essence of man

13. POPULATION HEALTH IS

1) A state of complete social, biological and mental well-being, when the functions of all organs and systems of the human body are balanced with the environment
2) The manifestation of the life of the state of equilibrium of its functions constitutes a normal or healthy life
3) The natural state of the organism, characterized by its complete balance with the biosphere and the absence of any pronounced painful changes
4) A conventional statistical concept, which is quite fully characterized by a complex of demographic indicators, the level of physical development, the incidence and frequency of premorbid conditions, the disability of a certain group of the population

14. LACK OF DEFINITION OF THE CONCEPT OF HEALTH OF THE WORLD HEALTH ORGANIZATION: "HEALTH IS A STATE OF COMPLETE PHYSICAL, MENTAL AND SOCIAL WELL-BEING, AND NOT JUST THE ABSENCE OF DISEASE OR PHYSICAL DEFECTS"

1) The concept of illness is subjective and requires a clear definition
2) This definition does not take into account the actions of social and biological functions of the body
3) Based on this definition, it is impossible to find a practically healthy person
4) This definition is conditional and statistical, not a characteristic of the health level of a particular person

15. APPROACH IN WHICH HEALTH IS DEFINED AS "DISEASE ZERO"

1) Pathocentric
2) Normocentric
3) Phenomenological
4) Existential

16. SPECIFICITY OF CONSIDERING HEALTH IN THE FRAMEWORK OF A SOCIAL APPROACH

1) Health is defined through the absence of bodily and mental illness
2) The emphasis is on the study of public health
3) Health for a person is an opportunity to realize itcapacity
4) Health is a universal human value

17. A DISTINCTIVE FEATURE OF THE MODERN HUMANITARIAN APPROACH IN DETERMINING HUMAN HEALTH

1) The choice of a health preservation strategy is determined by society
2) The choice of a health preservation strategy is determined by sociocultural factors
3) The choice of a health preservation strategy is determined by the norms and values of the social group
4) The choice of a health preservation strategy is determined by the person himself

18. SUBJECT OF STUDY OF SOCIAL MEDICINE

1) Regularities of the influence of economic conditions, factors and lifestyle of people on the health of the population
2) Regularities of the influence of social factors on the health of human groups
3) Regularities of health in time, in space, among different groups of the population in connection with the impact of conditions and lifestyle, environmental factors
4) Influence of social factors on morbidity and mortality

19. THE ESSENCE OF HEALTH AS A MEDICAL AND SOCIAL CATEGORY

1) Health depends on the economic state of society
2) Health is an important factor in successful social development
3) Health assessment is carried out on the basis of subjective data on the health status of the population as a whole or individual social groups
4) Health is determined by factors of social nature (conditions and lifestyle)

20. SOCIAL DETERMINANTS OF HEALTH

1) Social factors that determine the relationship of the individual with the environment
2) Social factors that contribute to the realization of an individual's life
3) Social factors that determine the level of adaptation of an individual's health in society
4) Social factors that determine this or that level of health of an individual, social group, society as a whole

21. SOCIAL DIFFERENCES IN THE HEALTH STATUS OF THE POPULATION WITHIN AND BETWEEN COUNTRIES

1) Social gradient of health
2) Social determinants of health
3) Social behavior in the field of health
4) Social factors of health

22. AN ELEMENT THAT IS NOT INCLUDED IN THE CATEGORY OF "ATTITUDE TO HEALTH"

1) Assessment of health status
2) Perception of health
3) Human activity in the environment
4) Activities to preserve health

23. INDIVIDUAL CHARACTERISTICS OF HUMAN BEHAVIOR IN RELATION TO HEALTH ARE

1) Healthy lifestyle

2) Healthy lifestyle
3) Self-preserving behavior
4) Risky behavior

24. THE AUTHOR OF THE THEORY, ACCORDING TO WHICH HEALTH FROM DISEASE CAN BE DISTINGUISHED USING AN OBJECTIVE CRITERION INHERENT IN THE FACTS

1) E. Durkheim
2) T. Parsons
3) E. Goffman
4) P. Bourdieu

25. "THE ROLE OF THE PATIENT" IN SOCIETY ACCORDING TO T. PARSONS

1) Deviant behavior that is consistent with normal social activities
2) Deviant behavior in which the patient refuses the help of a doctor
3) Deviant behavior that contributes to strengthening the stability of society
4) Deviant behavior that allows an individual to have special privileges in society

26. THE OBJECT OF THE SOCIOLOGY OF HEALTH IS

1) Potential activities of the individual and social groups aimed at preserving the health of the individual and society as a whole
2) The variety of real manifestations of the being of the individual and collectives of people, ensuring the maintenance and reproduction of health
3) Regularities and mechanisms of formation and maintenance of health
4) The mechanisms of social conditioning of health and its place in the system of sociocultural values

27. SOCIAL CONDITIONS AND DETERMINANTS OF HEALTH, SOCIAL MECHANISMS OF FORMATION, PRESERVATION AND PROMOTION OF HEALTH AT THE INDIVIDUAL AND POPULATION LEVELS

1) The object of the sociology of health

2) The subject of the sociology of health
3) Health factors
4) Methods of studying health

28. WHAT WAS THE NAME OF THE FIRST MAGAZINE DEVOTED TO THE SOCIAL ASPECTS OF HEALTH AND HEALTHCARE IN RUSSIA

1) Sociology of health
2) Sociological journal
3) Sociological research
4) Sociology of medicine

29. THE BEGINNING OF THE ACTIVE PROCESS OF INSTITUTIONALIZATION OF THE SOCIOLOGY OF HEALTH IN RUSSIA REFERS TO THE PERIOD

1) 1960s
2) 1970s
3) 1980s
4) 1990s

30. NAME THE PECULIARITY OF THE INSTITUTIONALIZATION OF THE NATIONAL SOCIOLOGY OF HEALTH AT THE PRESENT TIME

1) Lack of publications on social aspects of health
2) An increase in the number of monographs on sociological problems of health and health care
3) A large number of periodicals on sociological health problems
4) Consolidation of sociology of health as an academic discipline in the system of higher professional education

31. THE SPECIFICS OF THE INTERDISCIPLINARY APPROACH TO THE SOCIOLOGY HEALTH OF

1) The use of comparative analysis in health sociology and other middle-level theories
2) Networked collaboration of scientists from different countries in the framework of health problems and life expectancy

3) General subject field with medical and other sectoral sociological theories
4) Availability of equivalent indicators of the sociology of health

32. A GROUP OF FACTORS ACCOUNTING FOR 50% OF THE TOTAL NUMBER OF FACTORS THAT DETERMINE HEALTH

1) Genetics, human biology
2) State of the environment
3) The quality and level of development of medical care
4) Conditions and way of life of a person

33. THE FACTORS OF SUSTAINABILITY AFFECTING HUMAN HEALTH DO NOT INCLUDE

1) Physical inactivity
2) Healthy heredity
3) Medical screening
4) Environmentally friendly living environment

34. FACTORS DETERMINING HUMAN HEALTH AT THE PRESENT STAGE OF DEVELOPMENT OF SOCIETY

1) Social factors
2) Economic factors
3) Natural factors
4) Biological factors

35. FACTORS CONDITIONING HEALTH GENERATED BY THE INTERNAL DEVELOPMENT OF THE HUMAN BODY

1) Homogeneous factors
2) Heterogeneous factors
3) Exogenous factors
4) Endogenous factors

36. THE COMBINED EFFECT OF RISK FACTORS ON HUMAN HEALTH IS

1) Dependence of social risk factors on chemical, physical and biological factors
2) Situational impact of chemical, physical and biological factors on human health
3) Consecutive effects of chemical, physical and biological factors on human health
4) The simultaneous impact of several factors on human health

37. AN INCREASE IN THE AVERAGE LIFE EXPECTANCY OF A PERSON IS ASSOCIATED WITH

1) With the possibility of the impact of science on endogenous factors of mortality
2) With a sharp increase in the level of economic development of society
3) With a change in "environmental factors"
4) With the increasing role of exogenous factors in the field of health preservation

38. THE TOTALITY OF SEVERAL DIFFERENT AND INTERRELATED TYPES OF SOCIAL ACTIVITY IS

1) Lifestyle
2) Lifestyle
3) Healthy lifestyle
4) Healthy lifestyle

39. THE APPROACH, IN WHICH A HEALTHY LIFESTYLE IS DEFINED AS AN INTEGRAL INDICATOR OF THE CULTURE AND SOCIAL POLICY OF SOCIETY

1) Psychological and pedagogical
2) Biomedical
3) Philosophical and sociological
4) Socio-psychological

40. COMPONENT THAT IS NOT INCLUDED IN THE STRUCTURE OF THE HEALTHY LIFESTYLE CATEGORY

1) Objective social conditions
2) Specific forms of life, allowing for a healthy lifestyle
3) The system of value orientations guiding conscious activity
4) Adaptive capacities of the organism

41. THE SPECIFICS OF A HEALTHY LIFESTYLE FOR YOUNG PEOPLE

1) The behavior of young people should be deliberate and purposeful
2) The behavior of young people involves the use of material and spiritual conditions that have a beneficial effect on maintaining health
3) Behavior forms value orientations of health-preserving activity

42. THE SYSTEM OF ACTIONS AND RELATIONSHIPS AIMED AT MAINTAINING HEALTH THROUGHOUT THE ENTIRE LIFE CYCLE IS

1) Self-preserving behavior
2) Healthy lifestyle
3) Healthy lifestyle
4) Deviant behavior

43. FACTORS THAT DETERMINE THE INDIVIDUAL'S ATTITUDE TO HIS HEALTH

1) The quality of the environment
2) The level of medical care
3) The need for physical activity

44. VALUE ORIENTATIONS OF SELF-PRESERVING BEHAVIOR

1) Biological orientations
2) Psychological orientations
3) Social orientations

45. A PERSON'S SELF-ESTEEM OF HIS PHYSICAL AND MENTAL STATE IS A FACTOR

1. The relationship of the individual to his health
2. Medical awareness of the individual about his health

3. The systems of value orientations of the individual formedwithin a social group
4. Life expectancy of the individual

46. THE AUTHOR OF THE CONCEPT "ATTITUDE TO HEALTH"

1) E. Durkheim.
2) Antonov.
3) Zhuravleva.
4) L. Shilova.

47. THE SYSTEM OF OPINIONS AND SOCIAL NORMS EXISTING IN SOCIETY AIMED AT CHANGING THE STATE OF HEALTH OF THE POPULATION IS

1) Attitude towards health at the personal level
2) Attitude towards health at the level of social groups
3) Attitude towards health at the state level
4) Attitude towards health at the level of society

48. THE SOCIAL INSTITUTION THAT SHAPES THE ATTITUDE TO HEALTH

1) State
2) Education
3) Family
4) All of the above is true

49. "LOCUS OF CONTROL" IS

1) A concept that reflects a person's tendency to attribute the causes of events to external or internal factors
2) Human reaction to the effects of external and internal stimuli
3) Nonspecific response of the organism to any requirement of the external environment presented to it
4) The process of self-knowledge by a person of internal mental acts and states

50. A PERSON'S SUBJECTIVE ASSESSMENT OF HIS HEALTH IS

1) Self-esteem by a person of himself, his capabilities and qualities
2) The real indicator of human health
3) The determinant in predicting human actions

51. IMPLEMENTATION BY AN INDIVIDUAL OF A CERTAIN ACTIVITY IN ORDER TO ACHIEVE PHYSICAL HEALTH IS

1) Physical culture
2) Physical activity
3) Exercise
4) Physical activity

52. THE VALUE OF PHYSICAL CULTURE IN THE FORMATION OF HUMAN HEALTH

1) Means of physical culture develop the physical qualities of a person
2) Physical culture forms a competent attitude of a person to his body
3) Physical culture contributes to the upbringing of moral and volitional qualities

53. THE MACRO APPROACH TO THE STUDY OF HEALTH AS A SOCIAL INSTITUTION STUDIES

1) Studies the interaction of various social groups and individuals
2) Examines the role and place of a social institution in the social system
3) Studies the regulatory processes within a social institution

54. CHARACTERISTICS OF HEALTH CARE AS A SOCIAL INSTITUTION

1) Health care has a long history, which reflects the development of specific social needs of individuals, organizations, society in maintaining people's health
2) Has a system of specific rules and regulations
3) Has a complex organizational design

55. MEDICAL ACTIVITY OF FAMILY MEMBERS AIMED AT PRESERVING THEIR HEALTH INCLUDES

1) The use of traditional and traditional medicine

2) Ability to do without medical advice
3) Be critical of the provision of first aid

56. THE DISADVANTAGES OF THE STATE HEALTH CARE SYSTEM IN ECONOMICALLY DEVELOPED COUNTRIES (FOR EXAMPLE, GREAT BRITAIN) ARE

1) Lack of modern equipment
2) Lack of modern medical facilities
3) Queues for hospitalization

57. THE US HEALTH CARE SYSTEM IS AN EXAMPLE

1) State health care system
2) Health insurance system
3) The private health care system
4) Centralized health care system

58. THE MAIN PROBLEMS OF MODERN HEALTHCARE IN RUSSIA

1. Medicalization, availability of services, late appeal of the population for medical services
2. Lack of self-government in medical institutions, medicalization, availability of services
3. Late appeal of the population for medical services, the problem of "medical nomads", medicalization
4. Non-compliance of medical care with official standards, accessibility of services, late appeal of the population

59. CONSIDERATION OF MEDICINE AS A SOCIAL INSTITUTION IS ASSOCIATED WITH

1) Study of medicine along with other social institutions of society
2) Studying the impact of society on the development of medicine
3) Study of medicine as a social system with its social ties and social relations

60. THE STATE SYSTEM FOR MONITORING THE STATE OF HEALTH OF THE POPULATION AND THE ENVIRONMENT, THEIR ANALYSIS, ASSESSMENT AND FORECAST IS

1) Clinical examination
2) State control over the implementation of sanitary legislation
3) Sanitary and epidemiological surveillance
4) Social and hygienic monitoring

61. THE FUNCTION OF ADAPTATION ACCORDING TO T. PARSONS IN RELATION TO THE INSTITUTION OF MEDICAL CARE IS MANIFESTED IN

1. Professionalization of the functions of medicine and the division of labor
2. Distribution of roles "doctor-patient"
3. Coordination of activities of medical institutions
4. Social control of the desired behavior of participants in the institution of medical care

62. STRICTLY OBSERVED CUSTOMS IN THE FIELD OF HEALTH, ACCOMPANYING THE SOCIETY'S ASSESSMENT OF CORRECTNESS AND INCORRECTNESS, ARE

1) Customs
2) Installations
3) Morals
4) Values

63. NAME A SOCIAL INSTITUTION THAT, ALONG WITH MEDICINE, CONTRIBUTES TO THE DEVELOPMENT OF SOCIETY, ITS WELL-BEING AND IS ASSOCIATED WITH THE TREATMENT OF THE SPIRITUAL COMPONENT OF THE INDIVIDUAL

1) Religion
2) Education
3) Family
4) Physical culture

64. THE DOCUMENT, WHICH FOR THE FIRST TIME IDENTIFIED GENERAL AND SPECIFIC PROBLEMS OF SURVIVAL, ENVIRONMENTAL SAFETY AND SUSTAINABLE DEVELOPMENT OF CIVILIZATION

1) In the Millennium Development Goals, 2000
2) In "Agenda 21", 1992
3) In the "UN Millennium Declaration", 2000
4) The Human Development Report 2005

65. NAME 3 GOALS OF THE MILLENNIUM DEVELOPMENT GOALS PROGRAM THAT RELATE TO HEALTH

1) Improving maternal health, reducing child mortality, combating HIV / AIDS and other diseases
2) Ensuring gender equality, improving maternity protection, monitoring the nutritional status of the population
3) Reducing child mortality, improving the quality of the environment, sanitary and epidemiological surveillance of the production of tobacco and alcohol
4) Fight against HIV / AIDS and other diseases, reduce excess mortality among men, improve the reproductive health of the population

66. THE PRIORITY NATIONAL TASK OF THE RUSSIAN FEDERATION AT THE STATE LEVEL

1) Promotion of a healthy lifestyle of the population
2) Prevention and fight against socially significant diseases
3) Changes in consciousness and behavior in relation to public health
4) Improvement of public health protection

67. THE ORGANIZATIONAL PROBLEM OF THE EFFECTIVE FUNCTIONING OF SERVICES FOR THE PROTECTION OF PUBLIC HEALTH

1) Lack of regional target programs in most constituent entities of the Russian Federation
2) Lack of continuous professional development in the field of healthy lifestyle formation
3) Narrow focus of preventive measures to change health behavior

68. INCREASED ATTENTION TO HEALTH AT THE REGIONAL LEVEL HAS BEEN FACILITATED BY

1) Inclusion of human potential development among the priority tasks of the socio-economic development of the regions
2) Justification of the economic feasibility of strengthening the health of the population of the regions
3) A qualitative breakthrough in the regional health care system

69. THE MAIN DIRECTIONS OF REGIONAL HEALTH POLICY

1) Solving health problems
2) Formation of the principles of a healthy lifestyle of the population
3) Instilling the value of longevity

70. THE ACTIVE PHASE OF THE PATIENT'S TREATMENT IS (MARK 4 CORRECT ANSWERS)

1) Outpatient
2) Home hospital
3) Hospital ward
4) Rest house
5) Sanatorium
6) Winter fishing

71. THE COMPLEX OF ENVIRONMENTAL HEALTH FACTORS INCLUDES

1) Nutrition
2) Stress
3) Tobacco smoking
4) Living conditions
5) Contamination of the environment
6) Public isolation
7) The influence of the ebb and flow
8) Intrapersonal conflict

72. SECTORAL SOCIOLOGICAL DISCIPLINE, WHICH ANALYZES THE RECREATIONAL ACTIVITIES OF VARIOUS SOCIAL GROUPS, USES THE METHODS OF SOCIOLOGY OF HEALTH

1) Sociology of leisure
2) Sociology of labor
3) Gender sociology
4) Sociology of the family

73. A PATIENT IN A HOSPITAL (INPATIENT SETTING) EXPECTS

1) Depersonalization
2) Overpersonification
3) Anonymization
4) Depersonification

74. THE FORM OF INDIVIDUAL AND GROUP LIFE, TYPICAL OF HISTORICALLY SPECIFIC SOCIAL RELATIONS; OR A CONCEPT THAT CHARACTERIZES THE FEATURES OF PEOPLE'S EVERYDAY LIFE, DETERMINED BY A GIVEN SOCIO-ECONOMIC FORMATION

1) Lifestyle
2) Lifestyle
3) Quality of life
4) The standard of living

75. THE SOCIOLOGIST WHO FIRST DEVELOPED MODELS OF IDEAL TYPES OF DOCTOR AND PATIENT

1) T. Parsons
2) R. Merton
3) L. Molnar
4) M. Weber

76. THE SCIENTIST WHO CAME TO THE CONVICTION OF THE EXISTENCE OF THE "LAW OF BACK ASSISTANCE"

1) M. Sokolovskaya
2) G.Skumbler
3) T. Hart
4) E. Durkheim

77. ACCORDING TO SCIENTISTS, THE PROBLEM OF DEATH IN SOCIOLOGY HAS THE FOLLOWING ASPECTS

1) Medical
2) Social
3) Psychological
4) Pedagogical
5) Ethical
6) Urban

78. STATISTICAL STUDY OF THE HUMAN POPULATION, ITS SIZE AND DENSITY, TERRITORIAL DISTRIBUTION AND LIFE DYNAMICS (BIRTHS, MARRIAGES, DEATHS, ETC.)

1) Demography
2) Urbanization
3) Declassing
4) Marginalization

79. BIOLOGICAL REPRODUCTION POTENTIAL

1) Fertility
2) Fertility
3) Mortality
4) Marriage
5) Urbanization

80. THE SPREAD OF URBAN LIFESTYLE

1) Stratification
2) Agglomeration
3) Urbanization
4) Ethnogenesis

81. THE MAIN SIGNS OF URBANIZATION

1) Increase in the share of the urban population
2) Increasing the share of the rural population
3) Increase in the number of villages and hamlets
4) Increase in the number of large cities
5) The variety of branches of the national economy

82. CONSOLIDATION OF NEARBY URBAN AND RURAL SETTLEMENTS INTO ONE URBANIZED AREA

1) Stratification
2) Agglomeration
3) Urbanization
4) Ethnogenesis

83. GLOBALIZATION IS

1) Mutual penetration of individual national economies, coordination of the actions of governments in the development of economic policy that meets the interests of all parties involved in the integration process, as well as in relation to third parties
2) The process of uniting the economies of the countries of the world, creating a single legal, economic and information space
3) Mass actions of representatives of any one large social group or several, aimed at ensuring group or public interests, meeting needs
4) A qualitatively new stage in the interdependence of the world based on the latest communication technologies and competitive non-state efficiency

84. A SEPARATE, CONCRETE PERSON, AS A SINGLE REPRESENTATIVE OF THE HUMAN RACE

1) 1 person
2) Individual
3) Individuality
4) Personality

85. THE SUBJECT OF SOCIAL RELATIONS AND CONSCIOUS ACTIVITY

1) Person
2) Individual
3) Individuality
4) Personality

86. THE PROCESS OF PERSONALITY FORMATION IN CERTAIN SOCIAL CONDITIONS, THE ASSIMILATION OF SOCIAL EXPERIENCE, DURING WHICH SOCIAL EXPERIENCE IS TRANSFORMED INTO A PERSON'S OWN VALUES

1) Adaptation
2) Socialization
3) Isolation
4) Disadaptation

87. ESTABLISHING THE OPTIMAL CORRESPONDENCE BETWEEN THE INDIVIDUAL AND THE ENVIRONMENT IN THE COURSE OF HUMAN ACTIVITY, WHICH ALLOWS THE INDIVIDUAL TO SATISFY URGENT NEEDS AND REALIZE THE SIGNIFICANT GOALS ASSOCIATED WITH THEM, WHILE ENSURING AT THE SAME TIME THE CORRESPONDENCE OF THE MAXIMUM HUMAN ACTIVITY AND BEHAVIOR: TO THE REQUIREMENTS OF THE ENVIRONMENT

1) Social adaptation
2) Physical adaptation
3) Mental adaptation
4) Sociocultural adaptation

88. ACTIVE ADAPTATION OF A PERSON IN A DIFFICULT LIFE SITUATION TO THE RULES AND NORMS OF BEHAVIOR ACCEPTED IN SOCIETY, AS WELL AS OVERCOMING THE CONSEQUENCES OF PSYCHOLOGICAL OR MORAL TRAUMA

1) Social adaptation
2) Physical adaptation
3) Mental adaptation
4) Sociocultural adaptation

89. VIOLATION OF THE BODY'S ADAPTATION TO THE CONDITIONS OF EXISTENCE

1) Adaptation.
2) Socialization.

3) Disadaptation.
4) Integration.

90. THE TYPE OF MALADJUSTMENT ASSOCIATED WITH CONGENITAL OR ACQUIRED PHYSICAL CHARACTERISTICS OF THE INDIVIDUAL, REDUCING THE ABILITY TO WORK, MAKING IT DIFFICULT TO MOVE IN SPACE, SELF-SERVICE, ETC

1) Physical maladjustment
2) Psychological maladjustment
3) Social maladjustment
4) Economic maladjustment

91. ACTIVE INTERACTION OF A PERSON WITH THE SOCIAL ENVIRONMENT, WHERE HE TRIES TO MAKE A CONSCIOUS CHOICE AND CHANGE THE SOCIAL ENVIRONMENT

1) Adaptation
2) Socialization
3) Disadaptation
4) Integration

92. SOCIAL BEHAVIOR DEVIATING FROM THE ACCEPTED, SOCIALLY ACCEPTABLE BEHAVIOR IN A PARTICULAR SOCIETY

1) Deviant behavior
2) Delinquent behavior
3) Associal behavior
4) Addictive behavior

93. ONE OF THE FORMS OF DESTRUCTIVE BEHAVIOR, THE DESIRE TO ESCAPE FROM REALITY BY CHANGING ONE'S MENTAL STATE BY TAKING CERTAIN SUBSTANCES OR BY CONSTANTLY FIXING ATTENTION ON CERTAIN OBJECTS OR ACTIVITIES (TYPES OF ACTIVITY), ACCOMPANIED BY THE DEVELOPMENT OF INTENSE EMOTIONS

1) Deviant behavior
2) Delinquent behavior

3) Associal behavior
4) Addictive behavior

94. THE TYPE OF ADDICTION, WHICH INCLUDES SUBSTANCES THAT ALTER MENTAL STATES: ALCOHOL, DRUGS, DRUGS, TOXIC SUBSTANCES

1) Chemical addiction
2) Biochemic addiction
3) Non-chemical addiction
4) Psychic addiction

95. TYPE OF ADDICTION, WHICH INCLUDES INVOLVEMENT IN SOME TYPES OF ACTIVITY: GAMBLING, COMPUTER, INTERNET ADDICTION, RELATIONSHIP ADDICTION (CODEPENDENCY), WORK ADDICTION, ETC

1) Chemical addiction.
2) Biochemic addiction
3) Non-chemical addiction
4) Psychic addiction

96. BEHAVIOR CHARACTERIZED BY ISOLATION AND ISOLATION FROM SOCIAL CONTACTS, IMMERSION IN THE WORLD OF FANTASIES AND DREAMS

1) Aggressive
2) Fanatic
3) Suicidal
4) Autistic
5) Conformist

97. ACCORDING TO THE THEORY OF "DISEASES OF CIVILIZATION", THIS GROUP OF DISEASES IS A CONSEQUENCE OF THE TECHNOGENIC ACTIVITY OF INDUSTRIAL CIVILIZATIONS: POISONING OF SOIL, WATER, ATMOSPHERE

1) "Diseases of wasting"
2) "Diseases of pollution"

3) "Diseases of consumption"
4) "Diseases of inverse adaptation"

98. ACCORDING TO THE THEORY OF "DISEASES OF CIVILIZATION", THIS GROUP OF DISEASES IS CAUSED BY THE MISMATCH OF BIOLOGICAL AND SOCIAL RHYTHMS OF HUMAN LIFE

1) "Diseases of wasting"
2) "Diseases of pollution"
3) "Diseases of consumption"
4) "Diseases of inverse adaptation"

99. DISEASES COMMON IN ECONOMICALLY DEVELOPED COUNTRIES, THE ORIGIN OF WHICH IS ASSOCIATED WITH THE ACHIEVEMENTS OF SCIENTIFIC AND TECHNOLOGICAL PROGRESS: ISCHEMIC HEART DISEASE, ATHEROSCLEROSIS, HYPERTENSION, HEART ATTACKS, STROKES, MALIGNANT NEOPLASMS, ALLERGIES, OSTEOCHONDROSIS OF THE SPINE, ETC

1) Diseases of civilization
2) Socially significant diseases
3) Socially caused diseases
4) Socially active diseases

100. DISEASES FORMED UNDER THE INFLUENCE OF THE CLOSEST ENVIRONMENT OF A PERSON AND ARE ASSOCIATED WITH THE SOCIO-ECONOMIC STATE OF THE COUNTRY OF RESIDENCE: NARCOLOGICAL DISEASES, SEXUALLY TRANSMITTED DISEASES, TUBERCULOSIS, VIRAL HEPATITIS B, ETC

1) Diseases of civilization
2) Socially significant diseases
3) Socially caused diseases
4) Socially active diseases

STANDARDS OF ANSWERS TO TEST PROBLEMS

1.	3	**21.**	1	**41.**	4	**61.**	2	**81.**	1,4
2.	1,2,3,4	**22.**	2	**42.**	1	**62.**	3	**82.**	2
3.	4	**23.**	1	**43.**	4	**63.**	3	**83.**	2
4.	1	**24.**	1	**44.**	4	**64.**	1	**84.**	2
5.	3	**25.**	4	**45.**	1	**65.**	1	**85.**	4
6.	2	**26.**	2	**46.**	3	**66.**	4	**86.**	2
7.	1	**27.**	2	**47.**	4	**67.**	4	**87.**	1
8.	2	**28.**	4	**48.**	4	**68.**	4	**88.**	3
9.	3	**29.**	2	**49.**	1	**69.**	1	**89.**	3
10.	4	**30.**	4	**50.**	1	**70.**	1,2,3,5	**90.**	1
11.	4	**31.**	3	**51.**	2	**71.**	5	**91.**	4
12.	4	**32.**	4	**52.**	4	**72.**	4	**92.**	1
13.	4	**33.**	2	**53.**	2	**73.**	4	**93.**	4
14.	4	**34.**	1	**54.**	4	**74.**	1	**94.**	1
15.	1	**35.**	4	**55.**	1	**75.**	1	**95.**	3
16.	2	**36.**	1	**56.**	4	**76.**	3	**96.**	4
17.	4	**37.**	2	**57.**	3	**77.**	1,2,5	**97.**	2
18.	2	**38.**	1	**58.**	1	**78.**	1	**98.**	4
19.	4	**39.**	3	**59.**	3	**79.**	2	**99.**	1
20.	4	**40.**	4	**60.**	4	**80.**	3	**100.**	3

SITUATIONAL TASKS

№1. At the level of common sense, we divide facts into:

a) biological (sleep, food, breathing),

b) psychological (love, pleasure, hate),

c) sociological.

Give 5 examples of sociological facts. Argument your answer using sociological theories.

Answer: A sociological fact is a single, socially significant event or a set of homogeneous events typical of a particular sphere of social life or characteristic of certain social processes.

1) Social catastrophe in Donbass. Blockade of Donbass (type: actions, deeds of people). Creation of conditions for subordination.

2) terrorist acts — Japanese kamikaze (actions, psychological attack; product of human activity)

3) the strike phenomena of miners in 1988–1991. (type: actions, actions of people, product of human activity)

4) a punk prayer in the Cathedral of Christ the Savior of the members of the PussyRiot group (type: action, actions of people);

5) “I came, I saw, I won” — Caesar's assessment of his success in one of the battles (type: verbal actions, opinions, judgments).

№2. Patient M, 54 years old, is being treated in a surgical hospital for a tumor in the lung. During the next manipulation, the nurse, who followed the doctor's prescription, told the patient that his condition was hopeless and the treatment would not bring any results, perhaps he would develop lung cancer. As a result, the patient M. tried to commit a suicide attempt, his relatives wrote a complaint to the health authorities and filed a claim for compensation for the moral damage caused.

The answer is (correct). Communication with a patient involves the transfer of only that information that contributes to his speedy recovery, mobilization of his resources. The nurse did not have the right to transfer all the information that the specialists possess. Nurse behavior can be classified as psychological iatrogenism. Therefore, it is better to say less than to say too much. If a patient has questions about the disease and its prognosis, it would be more correct to say: “I would love to discuss this topic with you, I understand that it is important for you to know all this, but, unfortunately, I do not have the full information. so I recommend that you talk to your doctor about it. "

Answer (wrong number 1). When communicating with the patient, the nurse has the right to inform him about his diagnosis, to inform about the outcomes of the disease and the effectiveness of the treatment.

Answer (wrong number 2). The nurse has no right to tell the patient about his diagnosis. But it can inform about the diagnosis, treatment and prognosis of his relatives and friends.

№3. The patient's card is in the branch of the medical organization. The patient needs to take it to go to the doctor's appointment at another branch of this medical organization. He was rudely refused at the reception, saying that it was not his business and no one should give any cards to patients.

The answer is (correct). After carefully listening to the patient's request, the medical registrar had to reassure him and politely say that he was ready to help solve this situation. The phrases “This is none of your business”, “The cards should not be given to patients” are unacceptable. The registrar is obliged to issue the card, registering this fact in the journal.

Answer (wrong number 1). The medical registrar should silently ignore the patient's remarks, not enter into negotiations and conflicts with him.

Answer (wrong number 2). The medical registrar must say that this does not concern him, and the patient can solve his problems through the head of the polyclinic.

№4. The patient who made an appointment with the doctor went to the office where the nurse was. The nurse answered the question "Where is the doctor?" so that the patient closed the door on the other side and learned to read the announcements on the doors. The woman was outraged by such a rude response. When she found out that the doctor was ill and she took a leave of absence from work for an appointment, she told the nurse about it. To which she replied that it was her problem. The patient called with a complaint to the hotline with a request to deal with the rude behavior of the medical staff.

Answer (correct). The professional duties of a nurse include helping the doctor to organize the reception of patients, so informing patients about changes in the reception hours should be carried out in advance independently or through the registry. If this was not done in advance, the nurse had to apologize to the patient ("We apologize for the inconvenience...") and offer her a convenient time for the next appointment. In this case, we observe gross non-performance of professional duties and violation of ethical and deontological norms.

Answer (wrong number 1). The nurse had to remain silent and ignore the patient's comments. She does not need to explain to the patient what to do in this case.

Answer (wrong number 2). The nurse had to send the patient to the head of the clinic to solve her problem, explaining that nurses do not solve such problems.

№5. While working at the Institute of Surgery, a young resident witnessed the following case. While on duty, a patient who underwent a complex hip operation 3–4 days ago had a relapse of bleeding. The doctor who operated on him immediately arrived at the department, although he lived on the other side of the city, and the operation to stop the bleeding could have been performed by the surgeon on duty at that time, a competent specialist, candidate of medical sciences. And only after a while it turned out that because of this arrival, the doctor

and his family did not get to the most interesting performance, tickets for which it was almost impossible to get, and to which he really wanted to get.

What determined the act of a doctor who sacrificed a family holiday?

Answer: Mercy

№6. Patient M., 54 years old, is being treated in a surgical hospital for a lung tumor. The nurse who conducted the doctor's appointment, during the next manipulation, told the patient that his condition was hopeless and treatment would not bring any results, perhaps he would develop lung cancer. As a result, the patient M., who tried to commit suicide, his relatives wrote a complaint to the health authorities and filed a claim for compensation for non-pecuniary damage.

Answer (correct). Communication with the patient involves the transfer of only the information that contributes to his speedy recovery, the mobilization of his resources. The nurse had no right to transmit all the information that the specialists possess. The nurse's behavior can be qualified as psychological iatrogeny. So it is better to say less than to say too much. If the patient has questions about the disease and its prognosis, it is better to say: "I'd love to discuss this topic with you, I understand that it is important for you to know all this, but unfortunately I don't have full information, so I recommend you to talk about it with your doctor."

Answer (wrong number 1). When communicating with the patient, the nurse has the right to inform him about his diagnosis, inform him about the outcomes of the disease and the effectiveness of the treatment.

Answer (wrong number 2). The nurse does not have the right to inform the patient about her diagnosis. But he can inform his family and friends about the diagnosis, treatment and prognosis.

№7. After the appointment, the nurse asked the patient to wait in the corridor while she wrote out a prescription and a referral for examination.

The wait lasted more than 40 minutes. The patient began to protest. To which the nurse replied: "I have a lot of people like you, I don't like it - don't wait." The patient became ill, increased blood pressure-there was a hypertensive crisis.

Answer (correct). Prescribing medications, discussing the rules for taking them, side effects, duration of therapy, and referral for additional examinations is an important part of a doctor's appointment. This should take at least one-third of the total reception time. This will increase the level of trust and compliance of patients. The words of the nurse are a gross violation of deontological norms, devalue the patient's experiences. Each patient's experiences are unique to them, so they cannot be compared with others. If such a situation occurs (waiting for more than 40 minutes), the medical staff should apologize, emphasizing in their words the recognition of the value of this person.

Answer (wrong number 1). The patient should have been advised to return the next day to collect the prescription and instructions.

Answer (wrong number 2). The nurse had to give prescriptions and instructions in silence and not come into conflict with the patient. If the patient is dissatisfied, then send him to the head of the clinic.

Problem number №1.

Patient P., 42 years old, went to the polyclinic with complaints of lack of air, fear of death from suffocation. I felt practically healthy until recently, until one night there was an attack: I could not breathe deeply, there was a feeling of "coma" behind the sternum, obstruction in the trachea. The suffocation was accompanied by palpitations, tremors in the body and intense fear. I couldn't sleep. I went out onto the balcony, breathed fresh air until I calmed down. After that, attacks began to bother more and more often, especially in the morning (at 4–5 am), woke up in a panic, went out onto the balcony or street, walked in the air until breathing returned to normal. On the advice of his wife, he tried to take an infusion of valerian, novopassit, but this did not help. Complains of weight loss.

I am sure that he has a serious lung disease (possibly bronchial asthma), he is afraid that one night he will die of an attack.

Upon targeted questioning, it turned out that the first attack arose after a conflict with his superiors at work, where the question of his dismissal was raised as an inappropriate position. When his somatic condition worsened, he quit his job of his own accord and did not know what to do next. The mood is low, anxious, not confident in himself and his strength. He is pessimistic about the future, considers himself incapable of continuing his work, since he is not able to do anything other than working in the ministry.

Question:

1. Make a diagnosis. 2. Prescribe treatment.
2. What properties should your chosen drugs have?
3. What properties the prescribed drugs should not have, given that the man is of active age.
4. How long should the therapy be carried out.

Answer:

1. The doctor deals with typical masked depression. Diagnosis according to ICD-10: Somatoform dysfunction of the autonomic nervous system with panic attacks.
2. Treatment: antidepressants, at the time of an attack - tranquilizers with sedative and muscle relaxant effects.
3. Antidepressants should be anti-anxiety drugs.
4. When prescribing an antidepressant, it is necessary to take into account the active age of the patient
5. Therapy should be carried out for at least 6 months.

Problem number №2.

Patient K., 60 years old, was admitted to the hospital due to severe pain in the heart. The examination revealed an acute myocardial infarction and the patient was admitted to the intensive care unit, and after stabilization of the condi-

tion was transferred to the department of general cardiology. The patient has a decrease in mood, anxiety for his health. Sleep disturbed: afraid to fall asleep and die in a dream. He does not know how to behave: what can and cannot be eaten, drunk, etc. Constantly asks the doctor and staff what will happen to him next. Upon questioning, it turned out that the patient was healthy, worked and did not pay much attention to his health before entering the department. By nature, responsible, executive, anxious and suspicious. Lying in the department, I remembered all the relatives and friends who died of myocardial infarction. He recalled that his heredity was burdened by cardiovascular pathology and that his father died at about the same age from acute heart failure. Fixed on his condition and his experiences. He wants to get better, but does nothing for this.

Question:

1. What caused the mental disorders?
2. Give a definition of mental disorders.
3. Why are developed mental disorders dangerous?
4. With what effect is it preferable to choose psychotropic drugs?
5. What properties should the prescribed drugs not have, given the somatic disease?

Answer:

1. In this situation, myocardial infarction acts as a mental trauma that provoked the development of anxiety-depressive reaction.
2. Nosogenic depression.
3. Depressive state leads to passivity of the patient, refusal to actively cooperate with the doctor and can worsen the prognosis of the disease.
4. The patient is shown therapy with an antidepressant with anti-anxiety action. In addition, the patient is shown to carry out psychotherapeutic measures of an explanatory nature.
5. Considering the severity of the physical illness, it is necessary to choose an antidepressant that does not have cardiotoxicity.

Problem number №3.

A 27-year-old patient was brought to the regional hospital by passing transport, who, being in a state of alcoholic intoxication, fell asleep in the cold (-20 ° C). Found by a comrade. Adynamic, inhibited, comes into contact with difficulty. Moves independently slowly. PS 60 beats / min of weak filling. BP 90/60 mm Hg The fingers of the hands, feet are cold, waxy pallor and density, sensitivity is reduced.

Question:

1. Formulate the diagnosis.
2. Is it possible to determine the degree of frostbite on the first day?
3. Provide assistance to the victim — your actions.
4. What analyzes should you pay attention to?
5. Possible complications.

Answer:

1. General cooling of mild degree (adynamic form). Frostbite of hands and feet, pre-reactive period.

2. It is possible to accurately determine the depth of the lesions 5–6 days after the development of democration and mummification.

3.The victim is placed in a warm dressing room, general warming (covering with heating pads, hot tea, hands and feet are treated 70%

alcohol, a case novocaine blockade is produced and 0.25% — 200 ml on both forearms, 200 ml on the lower third of the leg. Semi-alcohol cotton gauze dressings.

IV in the first day is prescribed:

Sol. Glucosae 5% — 400.0

Ac. Ascorbinici 5% — 5.0

Ac. Nicotinici 1% — 1.0 2 times a day

Sol. Papaverini 2% — 2.0 Glucose heated to tempera

body tours.

Sol. Dimedroli 2% — 1.0

Sol. Reopolyglucini 400.0 IV / 2 times a day

S. Trentali 5ml / m 2 times a day

Sol. Novocaini 0.25% — 200.0

Sol. Glucosae 5% — 200.0 i.v.

4. Changes in the blood: erythrocytosis, high hemoglobin levels, increased blood viscosity.

5. First of all, on the part of the kidneys (first, an increase in diuresis, then oliguria, urine protein, azotemia — a clinic of acute renal failure.

Problem number №4.

I-va A.R., 25 years old, shop assistant - Niva LLC, residing at the address: Begovaya, 3, building 8, was admitted to the maternity hospital on March 3. She was 29 weeks pregnant, gave birth to a premature baby who died on the 4th day of life.

Question:

1) Make a decision on the examination of incapacity for work in this situation. Draw up the appropriate document.
2) Features of issuing a certificate of incapacity for work for pregnancy and childbirth?
3) Features of issuing a certificate of incapacity for work for multiple pregnancies?
4) Features of issuing a certificate of incapacity for work in complicated childbirth?
5) Features of issuing a certificate of incapacity for work at the birth of two or more children?

Answer:

1) In the case of childbirth before 30 weeks of pregnancy and the birth of a live child, a certificate of incapacity for work for pregnancy and childbirth is issued by the medical institution where the birth took place for 156 calendar days. In the event that childbirth ended in the birth of a still child or

his death occurred within the first 7 days after childbirth, the duration of postnatal leave will be at least 3 days.

2) For pregnancy and childbirth, a certificate of incapacity for work is issued by an obstetrician-gynecologist at the antenatal clinic (maternity hospital), and in its absence, by a doctor in charge of the general appointment. A certificate of incapacity for work is issued from 30 weeks of pregnancy. For antenatal and postnatal leave, one certificate of incapacity for work is issued at a time for 140 days in total (70 calendar days before delivery and 70 calendar days after delivery) in a single line.
3) In case of multiple pregnancy, a certificate of incapacity for work for pregnancy and childbirth is issued from 28 weeks of pregnancy with a duration of 194 calendar days. The duration of prenatal leave is 84, and the postnatal leave is 110 calendar days.
4) In case of complicated childbirth, the total duration of temporary incapacity for work increases, an additional certificate of incapacity for work is issued for 16 calendar days. The total duration of prenatal and postnatal leave for complicated childbirth is 156 calendar days.
5) In case of the birth of two or more children, the duration of the additional postnatal leave is 54 days. Thus, in case of multiple pregnancies and the birth of two or more children, the total duration of the vacation will be 194 calendar days. The certificate of incapacity for work is issued by the maternity hospital or the antenatal clinic at the place of residence on the basis of documents from the health care facility where the birth took place.

Problem number №5.

While working at the Institute of Surgery, a young resident witnessed the following case. During the shift, a relapse of bleeding occurred in a patient who had undergone a complex operation on the hip 3–4 days ago. The doctor who operated on him immediately arrived at the department, although he lived on the

other side of the city, and the operation to stop bleeding could have been performed by the surgeon on duty at that time, a competent specialist, a candidate of medical sciences. And only after a while it became clear that because of this visit, the doctor and his family did not get to the most interesting performance, tickets for which were almost impossible to get, and to which he really wanted to get.

Question:

What determined the action of a doctor who donated a family holiday?

Answer: By Mercy

Problem number №6.

Tram driver, 40 years old, is susceptible to epileptic seizures that only the attending physician knows about.

Question:

Is he obliged to report the patient's illness at his place of work?

Answer: Not obligated, observing the principle of confidentiality. When employed, drivers undergo a medical examination, where the fact of a person's presence on the dispensary should have been revealed. accounting in a neuropsychiatric hospital.

Problem number №7.

The AIDS patient asks not to disclose his diagnosis to his partner or partner.

Question:

What are the legal and ethical standards in this case?

What is the best option for a doctor's behavior you can suggest?

Answer: the principle of confidentiality (medical confidentiality) applies. The doctor must conduct a conversation with the patient, inform about the moral and legal responsibility of AIDS patients to society and partners.

Problem number № 8.

The family doctor supervises families whose children want to get married. However, in one of the families, there is a blood disease that is inherited, which they are silent about, since they hope for a favorable outcome. The doctor, out of positive moral and ethical motives, told the second family about the hereditary disease.

Question:

What moral situation was the doctor in?

Answer: The doctor is obliged to maintain confidentiality. Guided by the principle of mercy, he can try to convince the patient not to hide this fact from future relatives.

Problem number № 9.

People without health insurance often cannot get help from health care providers. Doctors who provide assistance to such people are formally committing an offense.

Question:

How to evaluate the actions of doctors from an ethical point of view?

Answer: Doctors are guided by the traditional principles of medical ethics about the need to provide medical care to all who need it.

REVIEW QUESTIONS

1. Object and subject of the sociology of health.
2. The role and place of sociology of health in the system of social knowledge.
3. Institutionalization of the sociology of health.
4. The concept of human biosocial nature.
5. Approaches to the definition of "health". Individual and public health.
6. Health as a medico-social, socio-economic and socio-political category.
7. The essence of the sociological approach to the analysis of health.
8. Formation and development of sociological study of health abroad and in Russia.
9. Multivariate model of conditioning: exogenous and endogenous factors.
10. Classification and structure of factors shaping human health.
11. The concept of the combination of the impact of factors on human health.
12. The problem of social conditioning of health: the main directions of sociological research.
13. Social factors shaping the health of the population: essence and typology.
14. Model of the influence of social factors on human health.
15. The concept of "healthy lifestyle". Components of a healthy lifestyle.
16. The influence of lifestyle on the health of various social groups.
17. Physical culture as a factor in the formation of human health.
18. Attitudes towards health at various levels of the social system.
19. Subjective assessment of health and factors of its determination.
20. Self-preserving behavior of the individual: concept and factors.
21. Features of self-preservation behavior of modern youth.
22. Health care as a system of institutions that carry out the functions of protecting and maintaining health.
23. Health care activities in the field of family, education, labor.
24. Social problems of modern healthcare in Russia and abroad.

25. Basic dimensions of medicine as a social institution.
26. The structure and functions of medicine as a social institution.
27. The interaction of medicine with other social institutions.
28. Preservation of public health as a global strategic objective.
29. Prevention of diseases and the formation of a healthy lifestyle in the context of the state policy of the Russian Federation.
30. Regional aspects of preserving and strengthening the health of the population.

RECOMMENDED READING

Main literature:

1. Shchepin O.P., Medic V.A. Public health and health care: textbook. — Moscow: GEOTAR-Media, 2017.
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Recommended reading:

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14. Socio-philosophical aspects of health [Electronic resource]: textbook. manual / FSBEI HE "Bash. state medical. un-t "Ministry of Health of the Russian Federation; comp .: D.M. Azamatov, A.S. Valeeva, G.R. Davletshina. — Electron. text data. — Ufa, 2018. — Access mode: DB "Electronic educational library" http://library.bashgmu.ru/elibdoc/elib715.pdf

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